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UNIVERSITY OF ALBERTA

CONTINUING EDUCATION NEEDS AND JOB SATISFACTION OF NON-MEDICAL SUPPORT STAFF

BY

JEAN BLAKE

A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF EDUCATION IN ADULT AND HIGHER EDUCATION

DEPARTMENT OF ADULT, CAREER AND TECHNOLOGY EDUCATION

EDMONTON, ALBERTA

FALL, 1990

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SUBMITTED BY **JEAN BLAKE**

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF **MASTER OF EDUCATION**

IN **ADULT AND HIGHER EDUCATION**

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Date: September 14, 1990

DEDICATION

This study is dedicated to my husband and partner, Rob Blake, for his unswerving support and hours of technical computer assistance.

Abstract

The purpose of this study was to identify perceived work-related continuing education needs of non-medical support workers and to explore the relationship between continuing education needs and job satisfaction of workers.

The continuing education needs and levels of job satisfaction were identified through three approaches: interviews with managers, nominal group process meetings with representatives of staff, and a questionnaire distributed to all non-medical support workers in the eight participating departments.

The major continuing education needs identified and prioritized were, in order of importance, communication skills training, safety education, and training in job skills.

A generally high overall level of job satisfaction was found for the majority of non-medical support staff. Sixty percent reported they were mostly to very satisfied. The factors of job satisfaction examined were: the work itself, supervision, pay, co-workers, and opportunities. Opportunities were divided into two categories: opportunities for promotion and opportunities for personal growth and development. All factors were ranked by participants both for importance and for a satisfaction rating. Opportunities for personal growth and development was ranked fourth out of the six factors with regard to importance and fifth with regard to a satisfaction rating.

The highest ranked job satisfaction factor, both by

importance and satisfaction rating, was the people worked with. The lowest ranked factor was opportunities for promotion, again, both for importance and satisfaction rating.

The continuing education need and job satisfaction factors were analyzed for differences by the background characteristics of department at the hospital, age, level of education, and length of employment. The continuing education needs were also analyzed for a relationship to overall job satisfaction. No relationship between continuing education needs and job satisfaction was found. This is in contrast to an earlier study (Quastel, 1979) which found that learning needs and job satisfaction of community mental health workers were related. This difference in findings may indicate a difference in the needs of professional and non-professional workers. A need for further study is indicated in this area.

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CHAPTER 1

INTRODUCTION AND BACKGROUND

Major influences that currently affect Canadian hospitals include the rapid proliferation of biomedical technology, government regulations which impose severe constraints on operating budgets, changes in socioeconomic needs and career expectations of hospital employees, and worker shortages.

Under these influences, hospitals begin to show symptoms of stress: employee dissatisfaction expressed in alienation and withdrawal of services, internal conflicts and confusion, and lowered levels of productivity, quality and efficiency.

These quality of working life problems are reported most commonly among non-professional employees, in particular, the non-medical support staff such as maintenance, housekeeping and laundry staff (Kahn & Westley, 1984).

A national study by Labour Canada on "The Working Environment in Canadian Hospitals" (Kahn & Westley, 1984) found that non-professional employees' complaints about their jobs include the lack of opportunity to make decisions, the lack of opportunity to learn new skills, the lack of opportunity for advancement, the lack of mutual respect and support among co-workers, boredom with their jobs, and the

lack of meaningfulness of their task (p.16).

Surveyed union officers reported that workers often complained about the lack of autonomy(53.5%), the lack of advancement (50%), and the lack of opportunity to learn new skills (41.7%) (p.16). Kahn and Westley also revealed that older workers generally complain less about their work because they expect less from it. Therefore, complaints may reflect the rising expectations younger workers bring to their jobs and may indicate that such workers will be dissatisfied unless their jobs can be changed to provide additional variety and challenge.

Hospitals are responding to these problems by introducing many organizational innovations: recruiting new kinds of staff specialists in human resource development, trying to create teams, and so on (Kahn & Westley, 1984).

Previous to and concurrent with this study, Lions Gate Hospital was developing a strategic plan in recognition of the many external and internal pressures and issues. This plan was released to hospital staff in May, 1990.

The manpower goal within that plan (Strategic Plan, Lions Gate Hospital) is as follows:

> To develop a manpower strategy to address recruitment, retention, and training issues such that staff are recognized and rewarded for their efforts. This includes employee services which enhance the employment experience and the availability of continuing education opportunities. (p. 14, 1990)

One of the objectives states "Lions Gate Hospital must support staff training and educational opportunities." The strategic plan also includes a focus on participative management skills and involving staff in the problem-solving, decision-making process.

Effective training and educational experiences can play a vital role in creating increased employee involvement. The tools to enhance employee involvement include training employees to: 1) identify resource losses, and evaluate variables and come up with solutions, 2) creatively problem-solve, and 3) monitor projects (Burke & Scalfano, 1990).

Teamwork, communications, and innovation are integral parts of the programs. In support, supervisors need to receive instruction in coaching and reinforcing positive behaviours. Organizations need to help workers learn how to find answers to questions on their own and to be continually seeking new ideas for new problems (Burke & Scalfano, 1990).

To help people with these growth,change, and development needs, training and educational opportunities must be made available (Trust & Westley, 1982). Trust and Westley (1982) indicate that this should be a part of the basic motivational system of any organization. They indicate the following reasons:

1) Efficiency - reduced costs for supervision as workers become self-supervising.

2) Reduced absenteeism; in industry,there have been large

decreases in absenteeism sometimes from as high as sixteen to seventeen percent down to three percent.

3) Reduced turnover; if you like your work and find it fulfilling, you come to work.

4) Reduced waste as people get more interested in and committed to their work.

Some additional benefits include increase in employees' attention, thoughtfulness, creativity, and resources. As well, if people share goals, understand costs and really like their work, they will find many ways to reduce costs (Trust & Westley,1982).

Maynard (1990) indicates that getting and keeping good help will be the challenge of the 1990s. A critical shortage of workers and more socially conscious staffing policies have increased the heterogeneity of the work force.

The staffing crisis is reflected in a new individualism that prizes emotional fulfilment over money and a personal agenda over corporate loyalty. People want to make decisions, not just follow orders. And above all, they want to feel valued. Studies by Selection Research, Inc., a U.S. based company that advises Canadian Pacific, have shown that the number-one reason for resigning is: "My boss didn't care about me" (Maynard, 1990).

Maynard (1990) has a number of suggestions. Among them, she says to make training a priority. Companies that invest in training tend to have lower absenteeism and

turnover rates than those who do not. Maynard (1990) refers to a 1988 Decima survey, that shows that more than half of the workforce would gladly trade higher pay for additional training. Japanese workers, for example, average 20 times as much employer-sponscred training as ours do.

Maynard says we also need to talk to our employees more. She refers to a General Mills Restaurant survey in 1989 that revealed the workers' wish list: more pats on the back, more constructive criticism, and more information about absolutely everything from career opportunities to procedures in the kitchen. "Ycung employees today want to know why" (p. 46).

Learning has long been seen as an essential quality of life for most North Americans, who spend a great deal of time in various types of self-learning and formal learning situations. Workers regard this job attribute as one which makes their jobs more attractive.

However, over the years, human resource development courses have tended to be oriented toward the professional. These management and technical professionals already have substantial education before they are even hired. Non-professionals, those at the bottom of the hierarchial ladder, usually receive less attention for development.

There have always been legitimate, rational, economically sound explanations for this pattern. For example, just because non-professionals were not getting a

lot of formal training did not mean they were not getting some kind of informal training. And,if more dollars were devoted to management or professional training, are not these employees positioned to affect the organization's well-being more dramatically?

Then, too, the skills needed in professional positions are considered to be more difficult to develop than the ones for the non-professional.

However, old models of human resource development are cracking. Management layers are being eliminated, production people are beginning to manage themselves, jobs can no longer be designed around some single, repetitive motion. Workers with formerly rote jobs, who never before received much formal training are learning how to communicate, solve problems, perform a variety of jobs, work in teams and lead their co-workers.

Organizations in modern society are feeling strains resulting from changes in technology, in the expectations of workers, and in the demands made on them by an increasingly complex environment. Hospitals are particulary susceptible to such strains, since they have grown enormously, are highly labour intensive, and are very exposed to demands from the environment.

Symptoms of such strain are increasing in Canadian hospitals. Particularly among workers who are least influenced by professional codes and ethics, there are clear

symptoms of work dissatisfaction and absenteeism.

As well, there will be a shortage of low-level and entry-level hospital workers in the 1990s, according to a study, "Workforce 2000: Work and Workers for the 21st Century," conducted by the Hudson Institute (1989) for the U.S. Department of Labour. The reasons are:

1) The entire labour force is shrinking.

2) Demand for healthcare workers is increasing.

3) The relative education and skill level of new workers is declining.

4) Hospital jobs at almost every level tend to be more complex and require greater language, math, and reasoning skills.

5) About 80 percent of the net increase in the workforce between the years 1989 and 2000 will be minority, female, and immigrant workers.

6) By the year 2000, immigrants will represent the largest share of the increase in the population and workforce since World War I.

Experts in the hospital human resource field suggest offering basic training in literacy and workplace survival skills, and supporting community, government, and business efforts to increase training and education programs that teach students the specific skills needed by hospital workers.

This study explores what type of continuing education

opportunities are needed to assist hospitals in managing the issues discussed above, as well as the relationship between continuing education opportunities and non-professional employee job satisfaction. This study was chosen because of its practical application to the worksite and the intent to begin implementation of Lions Gate Hospital's strategic plan.

The Study

The Purpose of the Study

The purpose of the study is to identify perceived continuing education needs of non-medical support staff and to explore relationships between continuing education needs and job satisfaction.

The study attempts to provide answers to the following questions:

1. What continuing education opportunities are currently available to non-medical support workers?
2. What continuing education opportunities are participated in by non-medical support workers?
3. What are the perceived continuing education needs of non-medical support workers?
4. What are the preferences for means of addressing these needs?
5. How important are educational opportunities to non-medical support workers when ranked with other job factors?

6. What is the present level of overall job satisfaction of non-medical support workers?

7. Is there a relationship between continuing education needs and overall job satisfaction of non-medical support workers?

8. Are there differences in perceptions of continuing education needs and job satisfaction by respondents when grouped by background characteristics?

Delimitation of the Study

This study is confined to non-medical support staff in Lions Gate Hospital. It excludes medical support staff, non-professional nursing staff and managers.

Limitations of the Study

This study is limited to the perceptions of the population involved. The generalizability to other agencies should not be done without caution.

This study does not examine or attempt to quantify the effectiveness of non-medical support workers in their respective positions.

Definitions of Terms

Non-medical support staff - workers from laundry, housekeeping, food services, maintenance, materials management, admitting, finance, medical records.

Continuing Edcuation Need - self-perceived gaps in job-related skills,
knowledge and attitudes.

Job Satisfaction - self-perceived satisfaction with six general components: the work itself, supervision, pay, co-workers (people), opportunities for promotion, and opportunities for personal growth and educational development. These are assumed to be components of overall job satisfaction.

Significance of the Problem

Adult educators emphasize the importance of conducting needs assessment as an initial step in the continuing education process (Bergevin, 1967; Houle, 1972; Knowles, 1975). Skills, knowledge, and attitudes required to do the job form the basis for planning educational programs to enhance competencies. The extent to which gaps exist between present and desired levels of competence and the availability of training programs to meet educational needs affect work performance; the quality of performance in turn affects the level of satisfaction with the job (Schwab & Cummings, 1975).

Theoreticians in continuing education and industrial psychology suggest that a relationship exists between education needs, education opportunities, and job satisfaction. Hammer (1977) presents a model relating satisfied continuing education needs to positive job

attitudes, job growth and fulfilment. Herzberg (1973) suggests achievement, responsibility and advancement are attainable through opportunities for new learning. Glasscote and Gudeman (1969) found "new learning" to be the third most frequently cited job satisfier of 377 community mental health workers.

Casual observation suggests a significant relationship between provision of opportunities for continuing education and job satisfaction. That is, workers with access to continuing education may be significantly more satisfied than workers without access to appropriate learning opportunities.

Other than Quastel (1979), who did a similar study with a population of community mental health workers, it appears this relationship has not been systematically investigated.

Design of the Study

1. Approval by Lions Gate Hospital Research Committee to conduct the research study.
2. Interviews with managers of departments employing non-medical support staff to determine current continuing education opportunities and perceived gaps by management.
3. Nominal group process meetings with representative groups of non-medical support staff to determine perceived continuing education needs.
4. Questionnaire based on proceedings of nominal group process distributed to all non-medical support staff.
5. A job satisfaction survey distributed to the same non-

medical support staff at the same time.

The Setting of the Study

All of the study was done at one organization, Lions Gate Hospital in North Vancouver, British Columbia. Lions Gate Hospital is a large community hospital with 720 beds and provides both acute and extended care services.

At the time of the study, Lions Gate Hospital was operating 401 acute beds (beds set up and in operation vary depending on seasonal demand) which run at an average of 92% occupancy. The 25 bed discharge planning ward (located in the acute tower) and the 294 extended care beds in Evergreen House run at virtually 100% occupancy.

Within the Greater Vancouver Regional Hospital District there are a total of 5600 acute beds set up in 18 hospitals (December 1988 figures, includes psychiatric and rehabilitation beds in acute care hospitals). Lions Gate Hospital is the fifth largest in terms of number of acute care beds.

Lions Gate Hospital functions at a low ratio of acute beds to population served (2.8 beds per 1,000 population compared to the Provincial figure of 4.0 beds per 1,000 population). This has been possible through the provision of alternative service such as medical, surgical, and psychiatric day care services.

Lions Gate Hospital provides service to the North Shore

community, a population base of approximately 144,000. Patients from Pemberton, Whistler, Squamish, Sechelt, Powell River, and other areas who require major surgical and emergent procedures are also admitted. Laboratory, Radiology, and Biomedical Engineering services are also provided to these areas.

A July, 1990 organizational chart for Lions Gate Hospital can be found in the appendices of this study. The non-medical support staff, who are the subjects of this study, are members of eight departments that report to various vice presidents. These departments are: Admission Services, Financial Services, Health Records, Housekeeping, Linen Services, Materials Management, Nutrition Services and Plant Services.

These departments are grouped according to the services provided, other departments frequently liaised with, and to divide the responsibility among vice presidents.

The hospital is staffed by 2,270 unionized staff members(full and part time), 70 non-contract managers, 240 physicians , and approximately 500 auxiliary members. The subjects of this study are from the largest group of employees, 1159 Hospital Employee Union Members. The 453 staff were from the departments of Admission Services, Financial Services, Health Records, Housekeeping, Linen Services, Materials Management, Nutrition Services, and Plant Services.

Overview of the Report

The study includes a review of the relevant literature pertaining to the concept of need, the motivational aspects of need, need as a factor in program planning, the various components of job satisfaction, and the influence of continuing education of workers upon job satisfaction.

The methodology employed in the study is presented including the format of interviews with department managers, nominal group proceedings, and the survey design.

The research data are then presented followed by the discussion of the findings and the summary, conclusion, and recommendations.

CHAPTER 2

LITERATURE REVIEW

There are two concepts central to this study: need and job satisfaction. Need is reviewed from three aspects: defining the concept of need, applying the concept of need as a motivator, and the use of identified needs as a factor in program planning. Job satisfaction is reviewed for the purpose of providing a definition for the study and from the aspect of how education affects job satisfaction.

Need

The Concept of Need

Various definitions of need exist. Dictionary definitions include: a necessary duty or obligation; a lack of something requisite, desirable, or useful; a condition requiring supply or relief; and, want of the means of subsistence. Listed synonyms are necessity and exigency meaning a pressing lack of something essential (Webster's Seventh New Collegiate Dictionary, 1965, p.565).

Implications of the use of the concept of need as basic to a theory of education are broad and important. However, as Bergevin (1967) says, "much of the popular thinking about needs has been rather foggy." Komisar (1961) said that the term "need" survives and thrives because of the vagueness and

multiplicity of its meanings.

Monette states:

> Much of the fuzziness around the term need seems to be due to its indiscriminate application to society, communities, institutions and groups, as well as to individuals. (1977,p.120)

Knowles (1970) addressed this by proposing three types of need: 1) individual, 2) organizations or institutions, and 3) community or society at large.

When applied to individuals, need is generally used in two senses:

1) it is used interchangeably with "want" or "desire" and is often called "felt need," implying intentionality.

2) it is used to refer to some lack in the individual, gap in knowledge, attitude, or skill measured according to some objective criterion. For this concept, often called "real need," some outside observer is utilizing criteria which are not necessarily the individual's.

Murray, in his discussion of real and felt needs, says that

> a need is a construct (a convenient fiction or hypothetical concept) which stands for a force (the physio-chemical nature of which is unknown) in the brain region, a force which organizes perception, apperception, intelligence, conation and action in such a way as to transform in a certain direction,an existing, unsatisfying situation. (1938, p. 123-124)

This presents a unique and private view each person has of himself and the events in which he takes part. If the individual perceives a need, then, and only then, can a need

be said to exist.

Monette (1977) listed four categories in defining the term need: 1) basic human needs; 2) felt and expressed needs; 3) normative needs; and, 4) comparative needs. He defined basic human needs as a deficient state or tension that causes gratification seeking behavior such as in Maslow's(1968) hierarchy of needs. He indicated that felt need is the most commonly used definition for educational purposes and implies an ultimate goal. Bradshaw(1974) stated that assessments of felt needs are typically inadequate on their own, as they are limited by the perception of the individual and may not, therefore, be an indicator of real needs.

Monette's third category is a definition of normative needs where a deficiency or gap occurs between a "desirable" standard and a standard that actually exists and has criteria set by a particular group or segment of society. These standards are not absolute but involve value judgment in that the standards set by one expert may be conflicting with those set by another.

In contrast, Monette's fourth category for defining need is a comparative need which compares characteristics of those receiving a service with others who are not. Again, it is not felt to be an accurate assessment by itself.

Need as a Motivator

Maslow (1954),in his Theory of Motivation, constructs a concept of basic needs. He suggests needs arrange themselves in a hierarchial order from physiological to maximum actualization of an individual. The individual recognizes and is motivated to attain higher needs levels only when lower level needs have been at least partially gratified. Maslow contends that there is something resembling a potential which is part of man's nature and which provides a motivating concept of the desirable.

Houle (1961) suggests three motivational orientations for the adult learner:

1. The goal-oriented learner uses education to accomplish fairly clear-cut objectives. A crucial incident usually provokes the recognition of the need or interest followed by the will and opportunity to do something about it.
2. The activity-oriented learner is primarily seeking social contact. He may be primarily seeking escape for a time into an activity which is positive. For example, he may be escaping a job which is routine and distasteful. This learner begins participation in adult education when problems or needs become sufficiently pressing.
3. The learning-oriented learner seeks knowledge for its own sake. He has the desire to know and to improve his mind. He has been involved in learning for as long as he can remember. He often chooses jobs and make other decisions in life in

terms of the potential for growth which is offered.

Tough (1971) also investigated adults' motivation to learn. He found that his subjects organized their learning efforts around "projects" or "episodes" in which the person's motivation was to gain and retain certain fairly clear knowledge and skill, or to produce some other lasting change in himself. He also found that his subjects anticipated several desired outcomes and benefits. Some of these were immediate, such as satisfying a curiosity, enjoying the content or practising the skill; other benefits were long-term, such as producing something, imparting knowledge or skills to others, or understanding what will happen in some future situation. Clearly, pleasure and self-esteem are critical elements in the motivation found in Tough's subjects.

Continuing a line of research which flows from Houle's three factor typology, Boshier (1977) proposed a model which describes adult education participants as life-chance (deficiency) or life-space (growth) motivated.

The deficiency motivation resembles Maslow's description of deficiency in which individuals manifest behavior which is homeostatic, seeking to remedy a deficiency or imbalance in life. Such individuals participate in adult education because of lower order needs that are psychological or vocational. They need to acquire some utilitarian knowledge, attitude or skills. The growth motivated individual exhibits behavior which is heterostatic or self-actualizing. They participate

in adult education for self-expression rather than in an attempt to cope with some aspect of their lives.

The amount of motivation that has life-chance and life-space origins changes as a person increases in age and accomplishes developmental tasks that are appropriate for his culture and social situation.

Johnstone and Rivera found that

> job-centered reasons most frequently propel younger adults into education and, by comparison, the uses made of education by older adults are much less pragmatic and utilitarian...(a fact) reflected in the extent to which leisure centered goals were endorsed by persons in different age groups. (1965, p.156)

Need as a Factor in Program Planning

Knox(1968) states that some educators believe that a need has to be recognized by the potential learner before he is motivated to close the gap. However, Knox goes on to say that others hold that the major step in problem solving is the recognition of an existing problem, so that the most pressing needs that people have are ones that are better recognized by others. As in the explanation of "real" versus "felt" needs, if the lack really objectively exists, it is "real"; it is not only thought to exist. Although, the learner may not be aware of these needs, the learner's conscious desire or "felt" needs may be symptomatic of real needs (Monette, 1977). The perspectives of both the adult learner and others can help identify the gap.

Because learning is essentially an internal process, only learners themselves can, in the end, decide to learn and to act upon their learnings. Persons other than the learner can, in some cases, specify objective standards to which individuals can compare themselves in order to determine the nature and magnitude of their need.

Where such standards are absent or minimal, facilitators knowledgeable in a given area might supplement or even provide alternate reference points. Learners may also be helped to anticipate some learning needs that could arise in the future as a result of social trends or changes in the life cycle.

Continuing educators, experts, and others may assist the learner in recognizing gaps in skills, knowledge, and attitudes, but the perception of need in the situation belongs properly to the individual (Quastel, 1979). The education process, as Freire (1970) suggests, begins with the perceived needs of the constituency. These needs are defined as the skills, knowledge and attitudes required to do a job (Knox, 1974; Lewis, 1974) or as a gap between present and required level of competence (Knowles, 1975; Atwood & Ellis, 1971).

Very little of the literature deals with values or the role of normative considerations. Knowles (1970) refers to it. Atwood and Ellis (1971) point out that "values are so inextricably involved with needs that some attention to them seems to be required." Only James (1956) deals directly and

at length with the issue.

The importance is most obvious when the educator is faced with choosing among conflicting or contradictory needs. The concept of need has no meaning without a set of norms and therefore it is impossible even to identify needs without them.

James concludes that

> efforts to use "needs" to define goals frequently amount to an attempt by the educator to relieve himself of one of the duties assigned to him by society which is to delineate and define goals of educational institutions. Such use of "needs" is a consequence of misinterpreting the nature of social learning and misreading of the goal of educational leadership. (1956, p.26)

Monette (1977) stated that values are learned by social interaction and are shaped by society through many agents, one of whom is the educator. Freire (1970) contended that education is political (contrary to much of the needs literature that it is politically neutral or that it assumes the values of the client-system or that so-called self-fulfilment models are self-justifying) and that education is either used for individual adjustment to a given system or for the transformation of a system to the ends of the individuals involved.

James (1956) indicates the necessary mutual relationship between needs and functional philosophy of an institution which includes that institution's goals. Institutional goals influence the kind of needs assessment done as well as the

outcome once the needs have been analyzed and prioritized.

The adult educator is sometimes called upon to assess the "needs of the system" in order to improve the system performance through educational programs. Although systems in themselves do not have needs, the individuals in it do.

Applying these theories to staff development and continuing education, Lauffer (1978) proposed four models of continuing education.

In the consumer-choice model, the option of choice rests with the individual. In the training model, the learner is the target of change--persons other than the learner identify training needs and set instructional objectives. This model may be used when the learners have inappropriate attitudes, values or perspectives, an inability to perform tasks, a lack of knowledge, or a need for personal and professional growth.

In the consultation/education model, the organization perceives itself as a target of change; the intervention is focused on a specific organizational problem or in helping the organization to adapt to changes in its environment. Often this includes training staff in problem-solving techniques. The initiative and decision of what to do with the help remains with the consumer.

In the fourth model, systems-change, the adult educator is perceived as a "change agent" who focuses on specific problems, for example, lack of appropriate, available, or accessible services for a specific population; inadequate

coordination, cooperation and collaboration between service providers; poor management; or conflict. Both workers and agencies are the target of change.

When continuing education activities are provided, they often follow a logical flow of stages beginning with: 1. defining the problem to be addressed and assessing needs and interests, 2. building a formal or informal structure through which planning and programming take place, 3. formulating objectives and deciding on strategies, 4. implementing, and 5. monitoring and evaluating. However, it is not unusual for these stages to occur out of this order.

This study concentrates on stage one: defining the problem to be addressed and assessing needs and interests.

Job Satisfaction

Definition

Psychologists have been studying the concept of job satisfaction for over half a century. Munsterberg (1913) explored concerns with personnel selection, placement, and problems of improving physical aspects of the work situation.

In the Hawthorne studies (Roethlisberger & Dickson, 1939), the relationship between employee attitude and work behavior was explored. Lewin (1938) and Coch and French

(1948) looked at the importance of individuals' attitudes and feelings about their work.

There was a further proliferation of research on job satisfaction in the fifties and sixties. Amongst the attitude theorists, Fishbein (1967) and Festinger (1957) provided studies. The motivation theorists included Maslow (1954), McClelland, Atkinson, Clark, and Lowell (1953), and Herzberg, Mausner, and Snyderman (1959).

In 1969, Locke reviewed an estimated 4000 articles published on this subject. Still, job satisfaction remains a difficult concept to define.

Wanous and Lawler (1972) reviewed nine different operational definitions of job satisfaction. Porter (1961) measured satisfaction in different need areas while Smith, Kendall and Hulin (1969) measured satisfaction with such concrete job factors as pay and promotion.

Ewen (1967) summed satisfaction scores from the five components of the Job Descriptive Index and correlated the sums with overall satisfaction. Porter (1961) looked at goal attainment and need satisfaction.

Caroll (1973), in her review of the literature, said that job satisfaction, job attitude, and job morale were used interchangeably by many. However, Beer (1964) drew detailed distinctions in his definitions.

Vroom stated:

Job satisfaction and job attitude are used

> interchangeably since both refer to the affective orientation of the individual to the work role he is occupying. Positive attitudes are equated with satisfaction and negative attitudes with dissatisfaction. (1964, p. 99)

Herzberg et al. (1959) suggested a global definition of job satisfaction. Wanous and Lawler stated that "overall job satisfaction is the sum of job satisfaction across all facets of a job" (1972, p.95).

Smith, Kendall, and Hulin (1969) analyzed approximately 200 job dimensions and found a consistent pattern of five general categories: the work itself, supervision, pay, co-workers (people), and opportunities. This five dimensional definition is consistent with previous factor analytic studies (Ash, 1954; Astin, 1958; Baehr, 1954; Wherry, 1958). This construct of job satisfaction was used in the present study and the five categories are reviewed in the following section.

Satisfaction With the Work Itself

Herzberg et al. (1959) mention the "good" periods on the job and the feelings of contentment, achievement, recognition, responsibility, and advancement. Roach (1958), Kendall, Smith, Hulin, and Locke (1963), and others talk about the work itself as the most potent factor.

Satisfaction With Pay

Vroom (1964), Katzell and Yankelovitch (1975), and Herzberg et al, (1959) view pay as a source of worker dissatisfaction only. Equity theorists (Adams, 1963; Homans, 1961; Goodman & Friedman, 1975) say that satisfaction with pay is dependent not on absolute amount but on the relationship between the amount and some standard of comparison used by the individual. Satisfaction is obtained through maintaining a common ratio in distribution of rewards between persons performing similar tasks. Patchen (1961) refers to skill, seniority, and amount of education as standards of comparison.

Satisfaction With Supervision

Putnam (1930) and Jackson (1953) refer to this component as one of the most important. Vroom and Mann (1960) indicate there is a significant difference between the job attitudes of workers with authoritarian supervisors compared to those with egalitarian supervisors.

Likert (1961) refers to consideration for employees and leadership abilities and their affect upon job satisfaction. Locke's (1969) study on job values and Evans' (1970) study on performance goals inspired renewed curiosity concerning supervisory behavior and attitudes.

Satisfaction With Co-Workers

The interaction with others has been viewed to be an

important factor in job satisfaction. Walker and Guest (1952) found that isolated workers dislike their jobs and Sawatsky (1951) found that a low opportunity for interaction resulted in high turnover rates. The type of interpersonal relations (Vroom, 1964) and similarity of attitudes (Newcomb, 1956) affect group cohesiveness to a greater degree than amount of interaction (Cartwright & Zander, 1968). The degree to which an individual is accepted or valued by other group members is also important (Jackson, 1959).

Satisfaction With Opportunities for Promotion

Vroom (1964) stated that opportunities for promotion are directly related to job satisfaction. Patchen (1960) found there was a high frequency of absences among those who felt they deserved promotion and didn't get it. Sirota (1959) found a negative relationship between measures of promotional frustration and attitudes toward the company and that people with high needs for achievement find extreme frustration in jobs perceived as dead-end.

Such findings are repeatedly cited in the literature.

Education of Workers and Job Satisfaction

Access to education in North America, especially higher education, has increased much more quickly in recent years than has the demand for college-educated labour (Wright & Hamilton, 1979; O'Toole, 1977; Freeman, 1976; Boudon, 1973).

routes into "white-collar" employment are closed and, these individuals turn, through lack of alternative or choice, to "blue-collar" work. The reasonable expectation is that the number of college-educated in the working class will grow in the future.

Although a variety of studies (Gruenberg, 1980; Wright & Hamilton, 1979) suggest that college-educated workers are no more dissatisfied as a group with their work than less educated workers, they bring a different set of expectations with them.

Perhaps these better educated individuals are more aware of what constitutes effective and ineffective management techniques. Some studies (Gordon & Arvey, 1975) show that the more highly educated members of the work force were less satisfied with the general way the organization was being managed than were the less educated employees.

In general, Wright and Hamilton (1979) found college-educated people to be less concerned about friendly and helpful co-workers and supervisors than were less-educated respondents. The college-educated also attach less importance to job security, good pay, fringe benefits, and most other extrinsic benefits with the major exception of opportunities for promotion and advancement. These studies dealt with college-educated workers who were predominantly younger persons at the start of their careers. If these needs for promotion are not met, subsequent studies may show entirely

different levels of satisfaction.

The problem of overeducation is particularly acute in a society where the average education level of the population is increasing. Unless the job demands likewise increase, a progressively more dissatisfied work force is a likely consequence. Such a decline in job satisfaction is already taking place (Quinn & Baldi de Mandilovitch, 1980; Staines & Quinn, 1979).

The argument that increased education among "blue-collar" workers is "stimulating them to demand more meaning" in their work is apparently true, but the further implication, that the "new demands" would lead to greater worker alienation, apparently is not. Wright and Hamilton (1979) found that workers who rated both "interesting work" and "an opportunity to develop my own special abilities" as very important, scoring high in the "new needs," reported the most satisfaction with their jobs.

In Gruenberg's (1980) study of the generally high level of job satisfaction reported by workers holding manual or routine jobs, he applied the Durkheimian, "dispositional," social theory and the Marxian "situational" approach. He found that perceived intrinsic and extrinsic sources of satisfaction have powerful effects on overall job satisfaction irrespective of educational background. Intrinsic satisfaction is a powerful determinant of overall satisfaction among members of all occupational groups. Extrinsic

satisfaction is a much more important determinant of overall satisfaction among unskilled, semiskilled and professional workers.

However, Peterson's (1986) study of "Psychological Well-Being and Female Clerical Worker's" found that all women in the study, irrespective of life cycle stages, were highly committed to the concept of paid employment. The women's desire to work was strong, irrespective of economic gains.

Extrinsic rewards become an important determinant of overall job satisfaction only among workers for whom intrinsic rewards are relatively unavailable.

Gruenberg states:

> Among workers in occupations with generally low levels of intrinsic satisfaction, the expectation that work will or can provide such satisfaction decreases, and extrinsic rewards such as pay and job security become increasingly important" and "... increments of intrinsic satisfaction have powerful effects on overall job satisfaction irrespective of occupation. (1980, p. 267)

Being a member of an occupational group that scores high on intrinsic satisfaction has a positive effect on one's own job satisfaction independent of one's own level of intrinsic satisfaction. These findings advocate job-enrichment programs oriented to expanding and enriching the job experience.

If intrinsic rewards become more available, the intrinsic rewards undermine the importance of extrinsic rewards. It is suggested that the intrinsic factors are in fact the most potent factors in the work situation in terms of their

relationship to overall job satisfaction (Ewen, Smith, Hulin, & Locke, 1966; Friedlander, 1966; Halpern, 1965).

Centers and Bugental (1966) used Maslow's (1943) need-hierarchy to caution that individuals in lower-level occupations are more likely to be motivated by lower-order needs (pay, security, etc.) because these are not sufficiently gratified to allow higher order needs (the self-fulfilment possible in the job itself) to become prepotent.

Glenn and Weaver (1982) found that education does tend to enhance job satisfaction although the payoff of education in job satisfaction seems to have been largely in terms of extrinsic work rewards, for example, earnings, and occupational prestige. Glenn and Weaver (1982) found a positive effect of education on psychological well-being in general.

Although Glenn and Weaver (1982) support the view that the primary bases of productivity are structural and technological, they believe it is a mistake to assume that the psychology of individual workers is not important as well. In their study "Enjoyment of Work by Fulltime Workers in the U.S., 1955 and 1980," they found that satisfaction with extrinsic rewards of work (pay, prestige, etc.) may have increased while satisfaction with intrinsic rewards (direct enjoyment of work) declined.

Ford and Borgatta (1970) stated that if work can be shaped in such a way as to provide greater satisfaction to

workers, then the level of motivation through satisfaction from the work itself is raised. They refer to the desirability of having employees motivated through getting satisfaction with the work itself (Herzberg et al., 1959). Ford and Borgatta (1970) developed concepts to describe the aspects of work involved in job enrichment programs. They describe five concepts: 1) achievement, 2) recognition, 3) responsibility, 4) the work itself, and 5) growth and advancement.

Gruenberg's (1980) study concerning adequacy of the workplace and the type of people that one works with showed that most people were satisfied with their pay but dissatisfied with opportunities to learn new things on the job.

This study examines the relationship between continuing education and overall job satisfaction and explores the effect of background factors on perceptions of continuing education need and job satisfaction.

CHAPTER 3

METHODOLOGY

Three main strategies were employed in this study:

1) interviews with managers of eight departments employing non-medical support staff;

2) nominal group process meetings with representative groups of non-medical support staff;

3) a questionnaire distributed to non-medical support staff in the eight departments.

Interviews With Managers

As the population being studied was non-medical support staff, only those managers of departments employing non-medical support staff were interviewed.

Eight managers in all were interviewed. In each case, the manager was the head of the department. The departments were as follows: Admitting Services, Financial Services, Health Records, Housekeeping, Linen, Materials Management, Nutrition Services, and Plant Services.

The purpose of the interviews was to determine current continuing education opportunities for non-medical support staff and continuing education needs of the staff as perceived by the managers. An opinion on the relationship of continuing education opportunities and job satisfaction was solicited as well as perception of overall job satisfaction of their staff.

Managers were sent an information letter regarding the study and asked for their assistance in the study by participating in the interview. Follow-up phone calls were made to assess readiness to participate and to set up appointments for the interviews. All managers agreed to participate.

Managers were interviewed in a private office within a one hour time period each. Interviews followed a structured format with each manager asked the same set of questions as follows:

1) What continuing education opportunities are currently available to and participated in by non-medical support workers in your department?

2) What are your perceptions of the continuing education needs of non-medical support workers in your department?

3) What are your perceptions of the preferences for means of addressing these needs?

4) Is there a discrepancy between continuing education needs and available continuing education opportunities for your staff?

5) How important are educational opportunities to your staff when ranked with other job factors?

6) What is your perception of the present level of overall job satisfaction of non-medical support staff in your department?

7) Do you think that there is a relationship between educational opportunities and overall job satisfaction of non-

medical support staff in your department?

Additional probe questions had been prepared to assist the manager in providing as complete a response as necessary.

If the manager was unsure or hesitant about a response, the following probe questions were used for the corresponding main questions:

1) What kinds of educational activities do you sponsor? How is it decided who gets training? What is the monetary and time split, if any? Is there any special funding available such as grants through professional associations or company sponsorship? How many staff participate in educational activities?

2) Are there any work performance deficiencies? Are there any gaps in the skills, knowledge, and attitudes required to do a job? Do you have any new technology in your department? Are there any organizational development or change issues?

3) Do you prefer seminars, workshops, self-learning packages, videos? How long should sessions be and how often should they take place?

4) Have you enough resources to take advantage of educational opportunities for your staff? Are more opportunities needed? Are people coping?

5) How does satisfaction with educational opportunities compare with satisfaction with the work itself (content), satisfaction with supervision received, satisfaction with pay level, satisfaction with co-workers, and satisfaction with

opportunities for promotion?

6) How can you tell if your staff are satisfied or not? What are the positive and negative indicators? What kind of things do you see happening? What kinds of conditions contribute most to job satisfaction? What kinds of conditions interfere? What would you most like to change in the way this organization operates and the way this affects your staff?

7) Any comments or explanation? Why do you think that?

Nominal Group Meetings

Six meetings were held with representatives from the eight non-medical support departments. An effort was made to select participants from each department using random sampling. Some flexibility had to be left with department managers and supervisors about who would participate as, due to staffing patterns, workloads, and shift changes, staff selected randomly were not all available at the same time. Each selected individual was approached by the researcher, asked to participate, and given an informational letter. Several individuals declined to participate and the next individual on the staffing list was invited in their place.

The nominal group meetings were held department by department for the larger departments of Linen, Housekeeping, and Nutrition Services. In Nutrition Services, the largest department, two group meetings were held. Smaller departments

were combined - the clerical groups of Financial Services, Admitting Services, and Health Records in one group, and Plant Services and Materials Management in another. A total of six group meetings were held with a total of 35 participants. Each meeting lasted approximately one hour.

Each group had five to eight participants. In each group, the nominal group technique was used. The nominal group was originally developed by Andre Delbecq and Andren Van de Ven in 1968 as a technique to involve disadvantaged citizens in community action agencies. Since then, it has been widely applied in health, social service, education, industrial, and government organizations as a method for generating ideas in situations where the participants do not fully understand or agree upon the nature of the problem or how to solve the problem (Scott & Deadrick, 1982).

Van de Ven and Delbecq (1971) provide evidence that nominal groups can generate twice as many ideas as conventional groups. The nominal group technique is a structured group meeting conducted by a group leader or facilitator. The particular advantages of the technique are that it assures a balanced participation by all group members and incorporates voting techniques designed to facilitate group decision-making. It follows the process, summarized below:

The nominal group techniques are:

1) Individual silent generation of ideas in writing

2) Round-robin feedback from group members to record each idea in a terse phrase on a flip chart

3) Discussion of each recorded idea for clarification and evaluation

4) Individual voting on priority ideas with the group decision being mathematically derived through rank-ordering or rating.

It is recommended that groups be kept small (five to nine individuals) in interest of time and maximizing the process. In the group meetings at Lions Gate Hospital, five to eight individuals sat around a table in full view of each other, but initially no talking took place. Each individual had a sheet of paper, and in reference to the posted nominal question, independently and silently, wrote down as many answers to the question as possible.

The nominal question provided the primary focus of the meeting and was carefully constructed prior to the meeting in order to generate the required information.

The nominal question in this learning needs and job satisfaction study was:

"What problems and/or issues in your department could be addressed through training or continuing education opportunities provided to staff?"

After five to ten minutes of silent, individual work effort, individual responses were read in turn, until all ideas were listed. The ideas were written on flip chart paper and posted around the room. After all ideas were listed, each

was discussed to clarify and ensure it was understood by all group members in terms of a training or continuing education need.

The tagging or "hitchhiking" of ideas was encouraged. Each idea was thoroughly examined, with expressions of support and non-support from all group members encouraged.

At the conclusion of this phase, the participants independently selected priorities for continuing education by rank ordering, or rating, the listed ideas. Participants were asked to select their top three priorities and assign points to each--five points for the most important continuing education need, three points for the second most important, and one point for the third most important.

Points were then tabulated for each item in each group and items were rank ordered according to the number of points awarded. The points awarded in each group were accumulated for each item and are reported in Chapter 4.

Questionnaire

The questionnaire (see Appendices) consisted of three sections:

1) Background variables
2) Continuing education needs, and
3) Job satisfaction.

Background Variables and Learning Preferences

Five major variables were included: department, age, level of education completed, years of employment, and attendance at work-related training. Gender was not included because the Lions Gate Hospital Research Committee felt there would be a problem respecting confidentiality because of the comparatively few males in the non-medical support staff positions.

General information questions for the logistics of program planning purposes were also included in this section. eg. "When and where would you be willing/available to take courses?"; "How long should courses be?"; "Rank order preferred ways of learning."

Continuing Education Needs

The questionnaire was designed using the continuing education needs identified through the nominal group process and asked for the participant's perception of their individual needs for work-related continuing education. 45 items were listed with three additional spaces for participants to list items that they felt were needs but not already identified by the other items. Participants were asked to rate each item using a Likert scale as follows:

"What are **your** needs for work-related continuing education?"

For each item, please circle the number on the scale from 1

to 5 that **you feel** indicates the importance of each topic to **you.**

1	2	3	4	5
Not Important	Little Importance	Somewhat Important	Considerable Importance	Very Important

Job Satisfaction

This section had two parts. First, participants were asked to rate each of six listed factors in terms of its importance in the decision to continue to work at his job.

"How important is each of the following factors in your decision to continue work at your present job?"

For each item, please circle the number that you feel indicates the importance of each topic to you.

1	2	3	4	5
Not Important	Little Importance	Somewhat Important	Considerable Importance	Very Important

In the second part, participants were asked to rate each of the six factors again in terms of how satisfied they were with the factor in their present job.

"How satisfied are you with each of the following factors at your present job?"

For each item please circle the number that indicates your level of satisfaction with each factor.

1	2	3	4	5
Not Satisfied	A Little Satisfied	Somewhat Satisfied	Mostly Satisfied	Very Satisfied

A seventh item was added in part 2 requesting the

participants to rate their overall level of job satisfaction.

These items were based on the Job Descriptive Index, originated in the Cornell University Studies of Satisfaction (Smith et al., 1969). The index was designed for use with widely varying groups of individuals working under quite different kinds of employment situations. It provides detailed norms for a large cross section of workers and is strongly favoured in the literature as one of the most highly validated and reliable measures of job satisfaction (Vroom, 1964; Steers & Porter, 1975; Porter & Lawler, 1974; Cummings & Schwab, 1973).

Administration

The questionnaire was pretested by administering it to a participant from each of the nominal group meetings. Each of these participants was asked to solicit one other staff member from their department to answer the questionnaire as well. These 12 individuals were to note how long it took them to complete the questionnaire as well as to report any difficulties they had in understanding the wording or intent of any of the items. Several suggestions on wording of items and combining or eliminating of items were incorporated into the design of the questionnaire.

The questionnaire was then distributed to all non-medical support staff(453), with their paycheques, in the departments of Accounting Services, Admitting Services, Health Records,

Housekeeping, Linen, Maintenance, Materials Management, and Nutrition Services.

Approximately 40 to 50 responses were returned in the first week. In the second week after the mailout, the researcher (with the permission of department heads) did a walk-a-round of each department, reminding people of the survey, answering questions and asking for their help in completing/returning the survey. Second and third walk-a-rounds were done in each subsequent week.

A second mailout of the questionnaire was done four weeks after the first, appealing to respondents for their assistance. This elicited another 50 to 60 returns. Another walk-a-round produced 30 to 40 more surveys. A final walk-a-round, stopping to assist staff to complete a survey on the spot was done. This produced the remainder of the surveys with a few more returns coming in for up to a week afterwards the final walk-a-round.

Total return was 238 questionnaires giving an overall return rate of 53 percent.

Although returns increased after each walk-a-round, as many staff , especially in the larger departments, work on shifts, it was difficult to talk to all of them.

As well, not all staff in a department work in a centralized area but disperse to various work sites throughout the hospital as needed.

Several attempts were made to talk to people on

coffee/lunch breaks and these resulted in more returns. As well, supervisors/managers in several departments encouraged staff to fill out the surveys. Some gave work time and, again, this resulted in more returns.

Analysis of Survey Data

The statistical measurements of the survey data included:

1. frequency counts, percentages, mean values and ranges for the background variables.
2. mean values for ranking of the learning need variables and job satisfaction importance/rating factors.
3. analysis of variance or t-tests to establish the differences between department, age, years employed, years employed at Lions Gate Hospital, level of education, and overall job satisfaction as independent variables and each of the learning need variables.
4. analysis of variance or t-tests to establish the differences between department, age, years employed, years employed at Lions Gate Hospital, and level of education as independent variables and job satisfaction factors by importance and by rating.

CHAPTER 4

RESEARCH DATA

Research data are presented in three parts: interviews with managers, nominal group meeting results, and survey results.

Interviews with Managers

This information is presented following the format of the interviews (see Chapter 3, Methodolcgy).

Availability and Participation in Continuing Education

Managers indicated that continuing education opportunities were available to and participated in by non-medical support staff as Table 1 shows. The funds reported are used for both staff and management development. Funds are available only for work-related training. In the departments of Housekeeping, Linen Services, and Nutrition Services, funds are used mainly for management development. In the clerical and other departments, the funds are more available to support staff themselves, although there must be a direct relationship to the job.

Educational opportunities available to non-medical support staff are of two types:

1. Inhouse seminars or sessions funded by the department.
2. Registration, funded partially by the department, in outside programs at community colleges or at other organizations.

Table 1
Hospital Provision of Continuing Education Support for Non-Medical Support Staff (1989-90)

Department	Fulltime Staff	Support Staff Sponsored	$'s Available	Inhouse Programs
Admitting Services	39	4	$1500	1
Financial Services	15	5	$2000	0
Health Records	25	1	$1600	10
Housekeeping	77	0	$600	2
Linen Services	63	0	$200	2
Materials Management	48	5	$3000	1
Nutrition Services	156	0	$700	1
Plant Services	30	15	$3000	0

Note. The ten inhouse programs for Health Records are inservices that are part of monthly staff meetings.

Examples of inhouse education sessions provided by departments are as follows: safety lectures; Workplace Hazardous Materials Information System (WHMIS); training on the job for use of equipment, procedures; orientation to the department for new staff or changing of duties; education in staff meetings; and special needs that require an outside instructor be brought in.

Attendance at out of house sessions is initiated by a worker wanting to upgrade in the clerical and technical support departments. The number of staff that are able to take advantage of these funds is limited by the funds available. No money, other than for management development, is available for outside program sponsorship in the three departments of Linen Services, Housekeeping, and Nutrition Services.

Funding in the other departments is either based on an annual plan outlining upcoming education needs or on a first-come/first-serve basis. Occasionally, the entire program cost is funded but more usually sponsorship is on a fifty-fifty basis (50% from the hospital and 50% from the individual).

Special funding has been made available to one department for training of staff to maintain new and complicated pieces of equipment. This is "one time" money only and not part of the regular training budget.

Most of these outside programs are attended on the employee's own time, although the occasional one day program is approved as part of the work schedule. If the hospital requires the employee to take the training, as in the case of maintenance of new equipment, the training is attended entirely on work time.

Perceived Continuing Education Needs

Managers perceived the continuing education needs of non-medical support workers in a variety of areas. These needs were summarized as follows:

1. Wellness activities were listed by all of the eight managers, although one mentioned that these programs should be attended by staff on their own time. Programs listed were stress management, enhancing self-esteem, physical fitness, back safety, weight loss, nutrition information and stop smoking programs.

2. Safety programs were mentioned by four of the managers for enhancing safe working habits.

3. Interpersonal communication skills such as conflict resolution and problem-solving were listed by four managers.

4. Two managers indicated the staff need for management/supervisory training for career development; two indicated needs for learning how to set priorities; and two indicated information needs about other departments within the hospital. One manager said workers needed better orientation to skills needed to do the job properly.

Perceived Methods of Continuing Education

Two of the labour-intensive departments indicated that training could not be scheduled on work time other than for safety reasons.

The preferred means for addressing these needs was through short sessions provided inhouse of one to two hours in duration. A video library was mentioned by two managers as being a time-and cost-effective way to provide education. One manager felt occasional half-day, offsite sessions would be useful but improbable, given funding constraints.

Discrepancy Between Continuing Education Needs and Opportunities

When asked if they perceived a discrepancy between continuing education needs and available continuing education opportunities for their staff, managers responded as follows:

1. Three said "no" with the exceptions of information about employee assistance for one department, and English as a second language training in another department.
2. Two managers said "yes," there were discrepancies. One indicated that there were no resources available in terms of time and money.
3. Three were unsure and listed program areas where they thought more training could be made available such as conflict resolution, employee assistance, safety, and supervisory training.

Importance of Education

When asked how important they perceived educational opportunities to be to their staff when ranked with other job factors such as pay, relationship with supervisor and other staff, managers responded with a variety of comments as follows:

1. "Education is important to senior staff who want to advance. It is not important to junior staff who want to stay where they are."
2. Workers "initially do not want" /continuing education/. "You have to work with them individually. Learning opportunities are important for retention of new employees."
3. Education is "quite a ways down. The work is of a physical,

labouring type."

4. On a one to ten scale: "7."

5. "Low but that is because it is available."

6. "Low but it is available."

7. "High."

8. "Medium. Most employees are either long term or they are looking for something different."

Overall Job Satisfaction and Relationship to Educational Opportunities

When asked about their perception of employee overall job satisfaction, all managers said they thought it was "good" to "very good." Three managers thought there was a relationship between educational opportunities and overall job satisfaction of their staff, two thought that no relationship existed or a very limited relationship existed, and three managers said it depended on the individual.

Nominal Group Meetings

A summary of the results from the six groups is provided below. The continuing education needs and problems are shown in order of identified priorities. These priorities were selected through a voting process. Participants were asked to select their top three continuing education needs and to assign points to each, five points for the most important, three points for the second most important, and one point for the third most important. These

points were then tabulated for each item in each group and the items were rank ordered accordingly. The points awarded in each group were accumulated for each item and are reported below.

1. Communication had 100 points awarded. Items such as teamwork, assertive communication, problem-solving and conflict resolution for and with supervisors, positive communication and public relations were listed here.

2. Better training in the work area or for the job skills received 63 points. Items mentioned here included more thorough orientation, follow-up, involving staff in performance and in quality assurance activities.

3. Safety in the workplace received 48 points. Items grouped here included infection control education, employee health education such as a back program, chemical usage, and proper use of equipment.

4. Career development received 28 points. Items mentioned here were information on training for health related jobs and job opportunities in the hospital.

5. Stress management received 22 points.

6. Computer courses received 17 points.

All of the other continuing education needs discussed had few, if any, points, and so are not listed here. They were, however, used as variables in the continuing education needs survey.

Survey Data

The survey data are reported in five sections: background variables, continuing education needs, job satisfaction, the perceptions of continuing education needs when grouped by background characteristics, and the perceptions of job satisfaction when grouped by background characteristics.

Background Variables

The background variables reported include: department at Lions Gate Hospital, age, level of education, years employed, years employed at Lions Gate Hospital, work-related training attended in the last two years, financial and time assistance received from the hospital, and preferred ways of learning. Tables 2 through 8 display the summary data.

Department at Lions Gate Hospital. Table 2 indicates about half, or 125 respondents, were from the labour intensive departments which also form the majority of non-medical support staff (296 of the sample of 453). Roughly equal numbers of respondents from the clerical and technical areas formed the other half of the respondents.

Age of respondents. Table 3 shows that approximately half of the respondents were from the age category 26 to 40 years of age. This group formed the largest proportion of respondents. The next

largest group were workers age 51 to 55 years of age and formed 30 percent of respondents. Workers under age 26 and workers 56 years old and over each composed just over 10 percent of the respondents.

Table 2
Department at Lions Gate Hospital

Department	n	%
Labour intensive:		
Housekeeping	36	15
Linen Services	27	11
Nutrition Services	62	26
Clerical:		
Admitting Services	26	11
Financial Services	11	5
Health Records	18	8
Technical:		
Materials Management	28	12
Plant Services	21	9

Table 3
Age of Respondents

Age	n	%
Under 26	30	13
26 to 40	113	48
51 to 55	68	29
56 and over	26	11

Education of respondents. Table 4 shows that senior high and postsecondary certificate respondents formed the largest proportion or over 70 percent of respondents. Only eight percent

of respondents had less than senior high school and almost 20 percent of respondents had some university or a university degree.

Table 4
Education of Respondents

Education	n	%
High school or less	101	42
Elementary	1	0
Junior High	19	8
Senior High	81	34
Some postsecondary	133	58
Postsecondary certificate	89	37
Some university	22	9
University degree	22	9

Number of years employed. The mean number of years employed was 16.88 years with a standard deviation of 9.69 and a range of 0 to 45 years. Table 5 shows that the two largest groups of respondents had worked 6 to 10 years and 11 to 15 years. These two groups composed 40 percent of the respondents in equal proportions. Ten percent of the workers had been employed for less than 5 years. The other 50 percent of respondents are divided equally amongst the groups 16 to 20 years, 21 to 25 years, and 26 to 45 years of employment.

Table 5
Number of Years Employed

Years	n	%
0 to 5 years	23	10
6 to 10 years	48	20
11 to 15 years	50	21
16 to 20 years	39	16
21 to 25 years	38	16
26 to 45 years	40	17

Number of years employed at Lions Gate Hospital. The mean number of years employed at Lions Gate Hospital was 7.54 years with a standard deviation of 5.80 and a range of 0 to 28 years. Table 6 shows that the largest group (26 percent) had been employed for 10 to 14 years at Lions Gate Hospital. Groups of workers who had been employed for 5 to 9 years and 2, 3, and 4 years composed about 40 percent of the respondents in equal proportions. Workers employed for a year or less, at Lions Gate Hospital, composed 17 percent of respondents and workers employed for 15 years or more, at Lions Gate Hospital, were the smallest group (13 percent) of respondents.

Table 6
Number of Years Employed at Lions Gate Hospital

Years	n	%
0 to 1 year	41	17
2,3,4 years	54	22
5 to 9 years	49	21
10 to 14 years	61	26
15 plus years	33	13

Participation in continuing education activities. Table 7 indicates that more than 40 percent of respondents had attended work-related training in the last two years. Of these, almost 40 percent had received some financial assistance from the hospital. Sixty-five percent of the workers attending work-related training did so entirely on their own time. Twenty-six percent attended entirely on hospital time with a further nine percent attending on a shared time basis.

Table 7
Participation in Continuing Education Activities

Participation		n	%
Attended work-related training course in the last two years	yes	100	43
	no	134	57
If yes, received financial assistance from the hospital	yes	44	39
	no	68	61
If attended:			
attended entirely on own time		64	65
entirely on hospital time		25	26
shared time		9	9

Note. Percentages for the second and third clusters are based on only those respondents who received financial assistance from the hospital and who attended programs.

Future participation. When asked about future participation in work-related training and whether they would be willing to attend entirely on their own time, 40 percent or 94 respondents were willing. When asked if they would attend only if entirely on hospital time, 48 percent or 115 respondents said "yes." When asked if they were willing to attend training courses on a shared time basis, 64 percent or 152 respondents said "yes."

Preferred way of learning. Instructor led programs were most preferred and teleconferences least preferred (see Table 8). T.V. or video, reading books, and self-learning packages were fairly equally rated (Table 8).

Table 8
Preferred Way of Learning

Rank	Way of Learning	M	SD
1	Instructor	1.27	0.76
2	T.V. or video	2.90	1.12
3	Reading books	3.34	1.22
4	Self-learning packages	3.34	1.27
5	Teleconferences	3.91	1.16

Note. Mean: 1 = most preferred; 5 = least preferred.

Continuing Education Needs

Data are reported on continuing education needs by mean value in order to rank or prioritize the 45 items as Table 9 shows. Most continuing education needs had a mean of at least 3, which was a rating of "somewhat important." Almost half of the items had means of approximately 4 which was a rating indicating "considerable importance." Only seven items had a mean of less than 3, with ratings of 2 or "little importance" and 1 or "no importance."

The category of communication skills had the most items (nine) in it with most items receiving a high ranking. Six items had means greater than 3.5. Communication skills to work as a team, solving conflicts with supervisors, and solving conflicts with other staff were the three needs most highly rated. Positive communications with co-workers, patients and visitors was next in importance along with assertive communication skills.

Safety needs was the next category with the most items (eight) with the next highest priority. The top continuing education needs here were working safely to prevent accidents, learning about equipment changes that affect my safety, and how to take care of my back. Precautions against infectious disease, First Aid training, and educating staff in other departments about how their unsafe work habits affect me were also rated with means of 3.5 or more.

The third category of needs was training to do the job. Six items appear here, all with means of 3.5 or greater. Use of

equipment/machinery; better training to do a new job, and training in proper and safe use of equipment were the top three items in this category.

Wellness was the fourth category with eight continuing education needs in it. Means of 3.5 or greater were found for managing stress on the job and learning about programs available to staff. The other six items all have means of 3.0 to 3.49.

The computer skills category only had two items in it. Learning more advanced computer skills received a slightly higher rating ($\underline{M}$ = 3.63) than did basic skills of using a computer ($\underline{M}$ = 3.45).

The career development category had two items in it. Information on other job opportunities in the hospital is more highly rated than information on training needed for other jobs.

The final two categories, basic education and a general category, had seven and four items respectively. All of the basic education items were ranked with means of less than three. Finishing grade 12, the last item in this category, had the lowest mean of the 45 items. None of the general items are ranked above a mean of 3.5.

Additional space was provided on the questionnaire for listing other continuing education needs than those given. Respondents indicated a number of items, some of which were duplicated in the needs provided already on the questionnaire. Those that were additional are as follows: upgrade typing skills; accounting; business administration; patient care and handling;

speed reading; presentation/speaking skills; how to do a budget; to learn to talk and listen better; tradesman upgrading; supervisory training for supervisor; and awareness of skills of other employees. These were all given a rating of considerable importance or very important but each was reported by only one person.

Table 9
Mean Rating of Continuing Education Needs

Rank	Continuing Education Need	M	SD
Communication skills:			
1	Communication skills to work as a team	3.96	1.33
2	Solving conflicts with supervisors	3.87	1.36
5	Solving conflicts with other staff	3.83	1.38
11	Giving positive feedback to co-workers	3.78	1.36
12	Assertiveness in communication style	3.74	1.37
15	Positive communication with patients and visitors	3.64	1.47
28	Proper business etiquette	3.42	1.49
29	Guest relations skills	3.41	1.42
36	Proper use of the telephone	3.27	1.44
Safety Needs:			
3	Working safely to prevent accidents	3.86	1.41
6	Equipment changes that affect my safety	3.82	1.43
7	How to take care of my back	3.81	1.43
13	Precautions against infectious disease	3.74	1.45

(Table 9 continued)

17	First Aid training	3.59	1.45
21	Educating staff in other departments about how their unsafe work habits may affect me	3.52	1.43
26	Information and training about chemical usage	3.44	1.55
35	Training about sharp object disposal	3.30	1.56
	Training to do the job:		
4	How to use equipment/machinery in department	3.86	1.44
8	Better training to do a new job	3.80	1.45
9	Training in proper and safe use of equipment	3.80	1.41
14	Training as a "backup" to other staff	3.73	1.40
19	The role of other staff on machinery	3.56	1.47
22	Periodic refresher training as a backup	3.52	1.43
	Wellness:		
10	Managing stress on the job	3.79	1.44
20	Programs available to staff	3.52	1.29
23	Fitness activities to improve health and well-being	3.48	1.39
27	Managing stress at home	3.44	1.53
30	How to take care of physical self eg. nutrition, weight loss, fitness	3.38	1.59
33	How to manage my use of time	3.31	1.52
34	Feeling better about myself	3.31	1.51
38	Adjusting to change more easily	3.20	1.52

(Table 9 continued)

Computer skills:			
16	More advanced computer skills	3.63	1.46
25	Basic skills of using a computer	3.45	1.57
Career development:			
18	Information on other job opportunities in hospital	3.58	1.43
32	Information on training needed for other jobs	3.38	1.40
General:			
24	Becoming more aware of my role in department program for checking quality of service	3.47	1.32
31	How to do performance appraisal of myself	3.38	1.37
37	Learning about other departments	3.22	1.16
42	Learning medical terminology	2.78	1.57
Basic education:			
39	Learning to write reports	2.94	1.55
40	Improving my writing skills	2.92	1.45
41	Improving my reading skills	2.80	1.50
43	Improving my math skills	2.62	1.44
44	Learning to read well enough to follow written instructions	2.34	1.67
45	Finishing grade 12	1.82	1.48

Note. Mean: 1 = not important; 5 = very important.

Job Satisfaction

Table 10 reports job satisfaction data by mean value for both

importance and satisfaction rating of the job satisfaction factors.

Table 10
Means and Rankings of Job Satisfaction Factors for Importance and Satisfaction Rating

Factor	Importance		Satisfaction	
	M	Rank	M	Rank
The nature of the job	3.931	3	3.487	2
Supervision on the job	3.435	5	3.315	4
Present pay level	4.151	2	3.406	3
The people worked with	4.152	1	3.906	1
Opportunities for promotion	3.429	6	2.478	6
Opportunities for personal growth and development	3.621	4	2.695	5

Note. Mean: 1 = not important or not satisfied; 5 = very important or very satisfied.

The importance of each of the factors was always scored higher than the corresponding satisfaction rating of the factor. In other words, respondents felt the importance of the factor to be greater than their actual satisfaction with the factor in their jobs. Generally, there is consistency between importance and satisfaction rating. The differences in ranks are zero or one.

The highest ranked job satisfaction factor, both by importance and satisfaction rating, is the people worked with. The lowest ranked factor is opportunities for promotion, again

both for importance and satisfaction rating.

The importance of opportunities for personal growth and development is higher than the importance of the supervision on the job or opportunities for promotion, but lower than the people worked with, present pay level, and the nature of the job itself.

The rating of satisfaction with opportunities for personal growth and development and opportunities for promotion are in the "little satisfied" to "somewhat satisfied" scores whereas all the other factors, and overall job satisfaction, are scored as "mostly satisfied" to "very satisfied."

Table 11
Overall Job Satisfaction Levels of Workers

Level of satisfaction	n	%
Not satisfied	26	11
A little to somewhat satisfied	71	30
Mostly satisfied	104	44
Very satisfied	33	14

Note. Overall job satisfaction: $M = 3.45$; $SD = 1.14$.

The overall job satisfaction levels of workers is reported in Table 11. The mean overall job satisfaction was 3.45 on a scale of 1 to 5 with 1 as "not satisfied" and 5 as "very satisfied." The majority of respondents report that they are mostly to very satisfied. Thirty percent said they are a little to somewhat satisfied and 11 percent said they are not satisfied.

The Effect of Background Characteristics on Continuing Education Needs

The effect of department, age, total years employed, years employed at Lions Gate Hospital, and overall job satisfaction on continuing education needs is reported in Tables 12 to 17.

Continuing education needs by department. Table 12 lists items that were identified as significant continuing education needs by all three groups of departments--labour intensive, clerical, and technical.

Clerical workers identified continuing education needs for communication items as a significantly stronger learning need than labour intensive workers. Clerical workers rated these items as of "considerable importance": Communication skills to work as a team, assertiveness in communication style, solving conflicts with other staff and with supervisors, giving positive feedback to co-workers, proper use of the telephone, and proper business etiquette.

Technical workers rated continuing education needs in the safety area, such as equipment changes that affect my safety and how to work safely to prevent accidents, significantly higher than both clerical and labour intensive groups and rated these items as of "considerable importance."

Technical workers rated other continuing education needs for educating staff in other departments about how their unsafe work habits may affect others, precautions against infectious disease,

and training about sharp object disposal as a significantly greater need than did the clerical departments.

The technical group rated continuing education needs for fitness activities to improve health, how to take care of physical self, and managing use of time as a significantly greater need than did the labour intensive departments.

Both the labour intensive and technical areas rated information about chemical usage as a significantly higher continuing education need than did clerical workers.

Clerical workers rated learning more advanced computer skills as a significantly stronger need than either the labour intensive or technical areas. Clerical workers also indicated a significantly stronger continuing education need for managing stress on the job than did the labour intensive worker.

Table 12
Mean Continuing Education Needs by Department

Continuing Education Need	F	p	M for Group 1	2	3	Scheffe p ≤ .05
Communication skills to work as a team	3.29	.04	3.76	4.30	4.06	2 > 1
Assertiveness in communication	5.72	.00	3.49	4.20	4.06	2 > 1
Solving conflicts with other staff	5.49	.00	3.62	4.34	3.88	2 > 1
Solving conflicts with supervisors	3.85	.02	3.70	4.31	3.92	2 > 1

(Table 12 continued)

Giving positive feedback to co-workers	4.66	.01	3.54	4.18	3.94	2 > 1
Proper use of the telephone	4.82	.01	3.00	3.64	3.53	2 > 1, 3 > 1
Proper business etiquette	5.24	.01	3.17	3.94	3.41	2 > 1
Guest relations skills	5.00	.01	3.18	3.90	3.41	2 > 1
How to use machinery/equipment in the department	8.70	.00	3.48	4.22	4.31	2 > 1, 3 > 1
Training as a backup to other staff	3.43	.03	3.52	4.11	3.80	2 > 1
Periodic refresher training as a backup	5.77	.00	3.21	3.87	3.82	2 > 1, 3 > 1
Better training to do a new job	9.23	.00	3.45	4.36	4.08	2 > 1, 3 > 1
How to do performance appraisal of myself	4.23	.02	3.12	3.70	3.57	2 > 1
Equipment changes that affect my safety	3.22	.04	3.69	3.61	4.25	3 > 2, 3 > 1
How to educate staff in other departments about how their unsafe work practices may affect me	5.00	.01	3.53	3.08	3.96	3 > 2
How to work safely to prevent accidents	4.41	.01	3.77	3.56	4.34	3 > 2
Precautions against infectious disease	4.04	.02	3.72	3.38	4.19	3 > 2

(Table 12 continued)

Information and training about chemical usage	6.98	.00	3.53	2.82	3.90	3 > 2, 1 > 2
Training about sharp object disposal	3.23	.04	3.38	2.89	3.63	3 > 2
Fitness activities tc improve health	4.63	.01	3.22	3.69	3.85	3 > 1
More advanced computer skills	12.14	.00	3.25	4.36	3.74	2 > 1, 2 > 3
Managing stress on the job	4.98	.01	3.53	4.18	4.04	2 > 1
How to take care of physical self	5.41	.01	3.10	3.56	3.94	3 > 1
Managing my use of time	3.26	.04	3.08	3.51	3.67	3 > 1

Note. Group 1 = labour intensive; group 2 = clerical; and group 3 = technical. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

Continuing education need by age. Younger workers (groups 1,2, and 3 in Table 13) consistently indicated a greater need for continuing education in 13 of the items than did older workers (group 4, age 56 and over). These continuing education needs were in the communication skills, training to do the job, safety, and wellness categories.

Groups 2 and 3, workers age 26 to 55, also reported a greater continuing education need than older workers (age 56 and over) for

16 other items. These continuing education needs were in the communication skills, skills to do the job, and basic education categories as well as the individual items of managing stress on the job and at home, and managing use of time (see Table 13).

Workers age 41 to 55 showed a greater continuing education need than workers age 56 and over for training about sharp object disposal, improving reading skills, and how to take care of physical self. Workers age 26 to 40 showed a greater continuing education need than workers age 56 and over for learning about programs available to staff, giving positive feedback to co-workers, and basic skills of using a computer.

Respondents age 41 to 55 showed a greater continuing education need to improve writing skills than did either older workers, age 56 and over, or workers, age 26 to 40. Workers under 26 and from 41 to 55 years of age showed a greater continuing education need for precautions against infectious disease than did workers, age 56 and over.

No significant difference exists between any of the three younger age groups as reported in Table 13.

Table 13
Mean Continuing Education Needs by Age Group

Continuing Education Need	M for Group 1	2	3	4	Scheffe $p \leq .05$
Communication skills to work as a team	4.00	4.12	4.07	2.88	2 > 4 3 > 4 1 > 4
F 6.61 p .00					
Learn about other departments	3.03	3.38	3.34	2.44	2 > 4 3 > 4
F 5.24 p .00					
Programs available to staff	3.69	3.63	3.54	2.88	2 > 4
F 2.59 p .05					
Assertiveness in communication style	3.73	3.95	3.83	2.54	2 > 4 3 > 4 1 > 4
F 8.32 p .00					
Solving conflicts with other staff	3.70	4.11	3.82	2.81	2 > 4 3 > 4
F 6.87 p .00					
Solving conflicts with supervisors	3.70	4.12	3.84	3.04	2 > 4, 3 > 4
F 4.93 p .00					
Giving positive feedback to co-workers	3.83	3.95	3.76	3.03	2 > 4
F 3.25 p .02					
Positive communications with patients and visitors	4.00	3.70	3.71	2.79	1 > 4 3 > 4 2 > 4
F 3.48 p .02					

(Table 13 continued)

Proper use of the telephone	3.23	3.40	3.37	2.54	2 > 4 3 > 4
F 2.72 p .05					
Proper business etiquette	3.23	3.63	3.50	2.55	2 > 4 3 > 4
F 4.39 p .01					
Guest relations skills	3.34	3.60	3.48	2.44	2 > 4 3 > 4
F 4.90 p .00					
How to use machinery/ equipment in department	3.53	4.00	4.16	2.80	3 > 4 2 > 4
F 6.90 p .00					
The role of other staff on machine	3.07	3.67	3.84	2.88	3 > 4 2 > 4
F 4.19 p .01					
Training as a backup to other staff	3.72	3.86	3.87	2.73	3 > 4 2 > 4 1 > 4
F 5.18 p .00					
Periodic refresher training as a backup	3.20	3.63	3.76	3.69	3 > 4 2 > 4
F 4.44 p .00					
Better trained to do a new job	3.77	3.93	4.00	2.77	3 > 4 2 > 4 1 > 4
F 5.35 p .00					
How to do performance appraisal of myself	3.17	3.52	3.61	2.42	3 > 4 2 > 4
F 5.75 p .00					

(Table 13 continued)

My role in department program for checking quality service	3.34	3.55	3.73	2.58	3 > 4 2 > 4
F 5.45 p .00					
Equipment changes that affect safety	3.73	3.90	4,15	2.77	3 > 4 2 > 4 1 > 4
F 6.42 p .00					
Working safely to prevent accidents	3.83	3.92	4.18	2.92	3 > 4 2 > 4
F 5.37 p .00					
Precautions against infectious disease	4.03	3.72	3.95	2.96	1 > 4 3 > 4
F 3.52 p .02					
Training to take care of my back	4.00	3.84	4.16	2.65	3 > 4 1 > 4 2 > 4
F 7.89 p .00					
Training in proper and safe use of equipment	3.87	3.86	4.06	2.92	3 > 4 1 > 4 2 > 4
F 4.43 p .00					
Training about sharp object disposal	3.30	3.30	3.64	2.54	3 > 4
F 3.19 p .02					
First Aid training	4.13	3.70	3.65	2.27	1 > 4 2 > 4 3 > 4
F 9.93 p .00					
Fitness activities to improve health	3.53	3.70	3.58	2.23	2 > 4 3 > 4 1 > 4
F 8.79 p .00					

(Table 13 continued)

Info on training needed for other jobs	3.37	3.62	3 37	2.35	2 > 4 3 > 4 1 > 4
F 6.13 p .00					
Info on other job opportunities in hospital	3.80	3.79	3.54	2.50	1 > 4 2 > 4 3 > 4
F 6.39 p .00					
Improving reading skills	2.50	2.77	3.25	2.08	3 > 4
F 4.68 p .00					
Improving writing skills	2.87	2.76	3.49	2.11	3 > 4 3 > 2
F 7.06 p .00					
Improving math skills	2.57	2.64	2.93	1.85	3 > 4 2 > 4
F 3.62 p .01					
Basic skills of using a computer	3.52	3.58	3.54	2.64	2 > 4
F 2.62 p .05					
More advanced computer skills	3.53	3.86	3.78	2.32	2 > 4 3 > 4 1 > 4
F 8.59 p .00					
Managing stress on the job	3.43	3.92	4.10	2.72	3 > 4 2 > 4
F 7.06 p .00					
Managing stress at home	3.20	3.54	3.72	2.54	3 > 4 2 > 4
F 4.04 p .01					

(Table 13 continued)

Feeling better about myself	3.50	3.35	3.52	2.32	3 > 4 1 > 4 2 > 4
F 4.39 p .01					
How to take care of physical self	3.57	3.31	3.75	2.52	3 > 4
F 4.03 p .01					
Managing use of time	3.37	3.33	3.61	2.48	3 > 4 2 > 4
F 3.49 p .02					

Note. Group 1 = under 25 years of age, group 2 = 26 to 40 years old, group 3 = 41 to 55 years old, groups 4 = 56 years old and over. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

Continuing education need by education level. Table 14 indicates that group 2 respondents, those with some postsecondary education, rated nine of the 45 continuing education needs significantly higher than group 1, the respondents with high school or less. Five of these items were in the communication skills category and the difference in rating was usually "considerably important" for the group 2 respondents compared to "somewhat important" for group 1. There were two items where this was understandably reversed: to finish grade 12 and to learn to read well enough to follow written instructions. Neither of these items were rated very highly by either group.

Continuing education needs by length of employment. Table 15 indicates seven continuing education needs that were significant when related to length of employment. Five of the seven items pertain to safety training and the other two are basic education items.

Only four items had significant differences between different groups of employees when grouped by length of employment. In each case, employees of 21 to 25 years employment had significantly greater continuing education needs than the comparison group.

Respondents who had been employed for 21 to 25 years had significantly higher continuing education needs regarding safety for educating staff in other departments about how their unsafe work habits may affect others and for information and training about chemical usage than respondents new (0 to 5 year employment) to the employment field. These employees (21 to 25 years employment) also had a significantly higher continuing education need for training in the proper and safe use of equipment than employees of 16 to 20 years. The 21 to 25 year employee also had a significantly higher continuing educationneed about sharpobject disposal than did employees of 6 to 10 years.

Table 14
Mean Continuing Education Needs by Education Level

Continuing Education Need	T	p	M for Group 1	M for Group 2
Communication skills to work as a team	-2.28	.02	3.73	4.14
Assertiveness in communication style	-3.31	.00	3.40	4.01
Solving conflicts with other staff	-2.24	.03	3.60	4.02
Proper business etiquette	-3.21	.00	3.07	3.71
Guest relations skills	-2.25	.03	3.18	3.61
How to use machinery/ equipment in department	-2.11	.04	3.63	4.04
How to do a performance appraisal of myself	-2.47	.02	3.13	3.59
My role in departmental program for checking quality of service	-3.43	.00	3.13	3.73
Finishing grade 12	2.41	.02	2.11	1.60
Reading well enough to follow written instructions	2.13	.04	1.78	1.57
Managing stress on the job	-2.49	.01	3.52	4.01

Note. Group 1 = high school or less; group 2 = some post-secondary education.

Table 15
Mean Continuing Education Needs by Length of Employment

Continuing Education Need	M for Group 1	2	3	4	5	6	Scheffe $p \leq .05$
Equipment changes that affect my safety	3.22	3.81	3.98	3.44	4.34	3.86	N.S.
F 2.62							
p .03							
How to educate staff in other departments--unsafe working habits may affect others	2.78	3.32	3.82	3.31	3.94	3.70	5 > 1
F 2.93							
p .01							
Proper and safe use of equipment	3.39	3.64	3.98	3.34	4.38	3.97	5 > 4
F 2.96							
p .01							
Information and training about chemical usage	2.74	3.06	3.76	3.24	3.97	3.70	5 > 1
F 3.32							
p .01							
Training about sharp object disposal	2.82	2.85	3.61	3.16	3.89	3.39	5 > 2
F 2.90							
p .01							
To finish grade 12	1.40	1.49	1.76	2.45	2.06	1.71	N.S.
F 2.47							
p .03							
Read well enough to follow written instructions	1.81	1.98	2.14	2.68	3.06	2.28	N.S.
F 2.75							
p .02							

Note. Group 1 = 0 to 5 years employment; group 2 = 6 to 10 years employment; group 3 = 11 to 15 years employment; group 4 = 16 to 20 years employment; group 5 = 21 to 25 years employment; group 6 = 26 to 45 years employment. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

Continuing education needs by length of employment at Lions Gate Hospital. Table 16 shows that employees who have been employed at Lions Gate Hospital for 5 to 9 years show a significantly higher need for information on other job opportunities in the hospital than do employees who have been employed at the hospital for 10 to 14 years.

Employees who have worked at the hospital for 15 years or more show a significantly higher need to learn to read well enough to follow written instructions than do employees who have worked at the hospital for 5 to 9 years.

Two other continuing education needs were significant at the $p \leq .05$ level, First Aid training and information needed on training for other jobs in the hospital. No groups were significantly different for these items.

Table 16
Mean Continuing Education Needs by Length of Employment at Lions Gate Hospital

Continuing Education Need	M for Group 1	2	3	4	5	Scheffe $p \leq .05$
First Aid training	3.85	4.00	3.51	3.35	3.16	N.S.
F 2.66						
p .03						
Info on other job opportunities in hospital	3.68	3.81	3.92	3.14	3.44	3 > 4
F 2.70						
p .03						
Info on training needed for other jobs at hospital	3.34	3.57	3.78	3.03	3.16	N.S.
F 2.42						
p .05						
Read well enough to follow written instructions	2.34	2.02	1.89	2.62	3.07	5 > 3
F 3.20						
p .01						

Note. Group 1 = 0 or 1 year employed at Lions Gate Hospital; group 2 = 2,3,4 years employed at Lions Gate Hospital; group 3 = 5 to 9 years employed at Lions Gate Hospital; group 4 = 10 to 14 years employed at Lion Gate Hospital; group 5 = 15 plus years. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

Continuing education need by level of overall job satisfaction. The only continuing education need where a significant relationship with overall job satisfaction was

indicated was for finishing grade 12 (see Table 17). Workers who were somewhat satisfied with their jobs showed a significantly higher continuing education need to finish grade 12 than workers who were not satisfied. However, this continuing education need was not rated highly by any of the groups, ranging from "not important" to "little importance.

Table 17
Mean Continuing Education Needs by Level of Job Satisfaction

Continuing Education Need	M for Group 1	2	3	4	Scheffe $p \leq .05$
To finish grade 12	1.24	2.29	1.701	1.74	2 > 1
F 3.50					
p .02					

Note. Group 1 = not satisfied; group 2 = somewhat satisfied; group 3 = mostly satisfied; group 4 = very satisfied. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

The Effect of Background Variables on Job Satisfaction

Tables 18 to 26 report the effect of the variables of department, age, total years employed, years employed at Lions Gate Hospital, and overall job satisfaction upon the various factors of job satisfaction.. Both the importance and the satisfaction rating of the job satisfaction factors are reported.

Job satisfaction by department. Table 18 indicates both clerical and technical workers rated importance of the nature of

the job as of "considerable importance" in comparison to "somewhat important" for the labour intensive group. Although all three groups rated supervision on the job as "somewhat important," this was significantly higher for technical workers as compared to the labour intensive. Opportunities for promotion were significantly more important to the clerical workers than to the labour intensive. Clerical workers rated "cpportunities for promotion" as of "considerable importance" in comparison to "somewhat important" for the labour intensive.

Table 18
Mean Importance of Job Satisfaction Factors by Department

Factors	F	p	M for Group 1	2	3	Scheffe p ≤ .05
The nature of the job itself	4.95	.01	3.72	4.13	4.23	3 > 1 2 > 1
Supervision you have on the job	4.17	.02	3.22	3.54	3.85	3 > 1
Opportunities for promotion	6.06	.00	3.15	3.98	3.54	2 > 1

Note. Group 1 = labour intensive; group 2 = clerical; group 3 = technical. Paired comparisons with means that differ significantly at p ≤ .05 are indicated.

Table 19 reports both clerical and technical workers rated satisfaction with the nature of the job itself significantly higher than the labour intensive. The means for the clerical and

technical groups were "mostly satisfied" in comparison to "somewhat satisfied" for the labour intensive.

Clerical ratings of satisfaction with opportunities for personal growth and development are "somewhat satisfied" and are significantly higher than for labour intensive which are "a little satisfied."

The mean overall job satisfaction for clerical and technical groups was "mostly satisfied" and was significantly higher than the labour intensive which was "somewhat satisfied."

Table 19
Mean Satisfaction Rating of Job Satisfaction Factors by Department

Factor	F	p	M for Group 1	2	3	Scheffe p ≤ .05
Nature of the job itself	8.67	.00	3.20	3.85	3.77	2 > 1 3 > 1
Opportunities for personal growth and development	4.81	.01	2.44	3.02	2.86	2 > 1
Overall job satisfaction	3.96	.02	3.25	3.68	3.67	2 > 1 3 > 1

Note. Group 1 = labour intensive; group 2 = clerical; group 3 = technical. Paired comparisons with means that differ significantly at $p \leq .05$ are indicated.

Job satisfaction by age. Table 20 reports employees in mid-career, age 26 to 55, indicated a significantly higher rating, of

"considerable importance," to the nature of the work itself than did older, pre-retirement (56 and over) workers or than the very young workers (under 26) who gave it a rating of "somewhat important."

Table 20
Mean Importance of Job Satisfaction Factors by Age

Factor	*F*	*p*	*M* for Group 1	2	3	4	Scheffe $p \leq .05$
The nature of the job itself	6.72	.00	3.60	4.03	4.22	3.17	3 > 4 3 > 1 2 > 4
Opportunities for promotion	4.58	.00	3.53	4.03	4.22	3.17	2 > 4 1 > 4
Opportunities for personal growth and development	6.80	.00	3.70	3.86	3.65	2.46	2 > 4 1 > 4 3 > 4

Note. Group 1 = under 26 years of age; group 2 = 26 to 40 years of age; group 3 = 41 to 55 years of age; group 4 = 56 years of age and over. Paired comparisons with means that differ significantly at $p \leq .05$ are indicated.

Younger workers (under 26) to mid-age workers (25 to 40) felt that opportunities for promotion were more important than did workers who were pre-retirement (56 and over). The younger to mid-age workers gave a rating of "considerable importance" in comparison to a rating of "little importance" by the pre-retirement workers.

All three of the younger age groups felt opportunities for personal growth and development were more important than did the pre-retirement group and the younger workers gave it a rating of "considerable importance" in comparison to "little importance" for the pre-retirement group.

Table 21
Mean Satisfaction Rating of Job Satisfaction Factors by Age

Factor	F	p	M for Group 1	2	3	4	Scheffe p ≤ .05
Opportunities for promotion	2.76	.04	2.55	2.55	2.62	1.76	3 > 4 2 > 4
Opportunities for personal growth and development	4.01	.01	2.70	2.84	2.77	1.88	2 > 4 3 > 4
Overall job satisfaction	3.34	.02	3.30	3.44	3.75	2.96	3 > 4

Note. Group 1 = under 26 years of age; group 2 = 26 to 40 years of age; group 3 = 41 to 55 years of age; group 4 = 56 years of age and over. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

Table 21 reports mid-career workers (age 26 to 55) were significantly more satisfied with opportunities for promotion and opportunities for personal growth and development than were the pre-retirement group (age 56 and over). All groups had fairly low ratings for these factors, with a mean value of "a little satisfied" for age 56 and up and a mean value of "somewhat

satisfied" for the other three groups.

Workers who are age 41 to 55 show a significantly higher overall job satisfaction than workers who are age 56 and over. The age 41 to 55 workers had a mean value for overall job satisfaction of "mostly satisfied," and the age 56 and over workers had a mean value of "somewhat satisfied."

Job satisfaction by education. Table 22 reports workers with some postsecondary education felt that each of the three job satisfaction variables was significantly more important than did workers with high school or less. Both groups of workers scored the importance of the nature of the job itself as of "considerable importance."

Both groups scored opportunities for promotion and opportunities for personal growth and development fairly high ("somewhat" to "considerable importance") but, as Table 22 reports, for each of these variables there was a significantly greater importance perceived by the workers with some postsecondary education.

There were no significant differences in their satisfaction rating of these factors.

Table 22
Mean Importance of Job Satisfaction Factors by Education

Factor	T	p	M for Group 1	M for Group 2
The nature of the job itself	-2.27	.02	3.74	4.08
Opportunities for promotion	-2.23	.03	3.20	3.66
Opportunities for personal growth and development	-2.95	.00	3.32	3.89

Note. Group 1 - high school or less; group 2 = some post-secondary.

Job satisfaction by length of employment. Table 23 reports the only job satisfaction factor for which there was a significant relationship between importance and length of employment was opportunities for promotion. Workers who have been employed for 6 to 10 years felt that opportunities for promotion were significantly more important (rating of "considerable importance") than do workers who had been employed for 26 to 45 years (rating of "somewhat important").

There were no significant differences between groups reported in the satisfaction rating of this factor or any of the other factors.

Table 23
Mean Importance of Job Satisfaction Factors by Length of Employment

Factor	M of Group 1	2	3	4	5	6	Scheffe $p < .05$
Opportunities for promotion	3.70	3.75	3.39	3.61	3.57	2.65	2 > 6
F 2.73							
p .02							

Note. Group 1 = 0 to 5 year employed; group 2 = 6 to 10 years employed; group 3 = 11 to 15 years employed; group 4 = 16 to 20 years employed; group 5 = 21 to 25 years employed; group 6 = 26 to 45 years employed. Paired comparisons of means which differ significantly at $p < .05$ are indicated.

Job satisfaction by years employed at Lions Gate Hospital. There were no significant differences between groups for the importance of the various job satisfaction factors in relation to years employed at Lions Gate Hospital.

Table 24 reports workers who are newly employed at Lions Gate Hospital (0 to 1 year) gave a significantly higher rating of satisfaction with supervision on the job and opportunities for promotion than employees who had worked at Lions Gate Hospital for 10 to 14 years. The newly employed worker was "mostly satisfied" with supervision on the job whereas those who had been employed for 10 to 14 years at the hospital gave it a "somewhat satisfied" rating. The newly employed worker was "somewhat satisfied" with

opportunities for promotion in comparison to "a little satisfied" for the 10 to 14 year employee.

The newly employed workers were also significantly more satisfied with opportunities for personal growth and development than were workers of 5 to 9 years and gave a "somewhat satisfied" rating compared to "a little satisfied" for the 5 to 9 year employee.

Table 24
Mean Rating of Job Satisfaction Factors by Years Employed at Lions Gate Hospital

Factor	M for Group 1	2	3	4	5	Scheffe $p \leq .05$
Supervision you have on the job	3.90	3.43	3.17	2.93	3.39	1 > 4
F 3.94						
p .00						
Opportunities for promotion	3.08	2.48	2.30	2.30	2.37	1 > 4
F 2.51						
p .04						
Opportunities for personal growth and development	3.28	2.57	2.50	2.57	2.70	1 > 3
F 2.67						
p .03						

Note. Group 1 = 0 or 1 year; group 2 = 2, 3, 4 years; group 3 = 5 to 9 years; group 4 = 10 to 14 years; group 5 = 15 plus years. Paired comparisons of means which differ significantly at $p \leq .05$ are indicated.

Job satisfaction by level of overall job satisfaction. Table 25 indicates that workers who were "very satisfied" felt the nature of the job itself was significantly more important than did any of the other three groups. The "very satisfied" workers gave an importance score of "very important" to the nature of the job. Workers who were "mostly satisfied" had a significantly higher mean ("considerable importance") for this item as well when compared to the "not satisfied" and "a little or somewhat satisfied" workers.

Workers who were "very satisfied" felt supervision was a more important factor than did workers who were "a little satisfied" to "somewhat satisfied."

Workers who were "not satisfied" felt pay level to be of significantly less importance than did all three groups of more satisfied workers.

Workers that were "mostly satisfied" felt opportunities for promotion were more important than did workers who were "not satisfied."

Workers who were more satisfied with their jobs overall rated each of the factors as significantly more satisfied than did less satisfied workers. This was a significant relationship, consistently, between each pair of groups of workers (see Table 26). For example, for the nature of the job itself, workers who were very satisfied showed a mean rating of very satisfied ($\underline{M}$ = 4.54). Workers who were mostly satisfied had a mean rating of mostly satisfied ($\underline{M}$ = 3.90) with this factor. Workers who were

somewhat satisfied had a mean rating of a little satisfied (M = 2.19).

This relationship holds for each of the other five factors as well--supervision on the job, present pay level, people worked with, opportunities for promotion, opportunities for personal growth and development.

Table 25
Mean Importance of Job Satisfaction Factors by Level of Overall Job Satisfaction

Factor	M for Group 1	2	3	4	Scheffe $p \leq .05$
The nature of the job itself	3.12	3.65	4.10	4.64	4,3 > 1 4,3 > 2 4 > 3
F 12.88 p .01					
Supervision you have on the job	3.27	3.09	3.53	4.00	4 > 2
F 3.95 p .01					
Your present pay level	3.50	4.10	4.29	4.33	4,3,2>1
F 5.66 p .00					
Opportunities for promotion	2.65	3.46	3.58	3.48	3 > 1
F 2.76 p .04					

Note. Group 1 = not satisfied; group 2 = somewhat satisfied; group 3 = mostly satisfied; group 4 = very satisfied. Paired means which differ significantly at $p \leq .05$ are indicated.

Table 26
Mean Rating of Job Satisfaction Factors by Level of Overall Job Satisfaction

Factor	M for Group 1	2	3	4	Scheffe $p \leq .05$
Nature of the job itself	2.19	2.86	3.90	4.54	4,3,2 > 1 4,3 > 2 4 > 3
F 55.83 p .00					
Supervision you have on the job	2.19	3.04	3.48	4.27	4,3,2 > 1 4 > 2 4 > 3
F 17.54 p .00					
Your present pay level	2.88	2.86	3.60	4.36	4,3 > 2 4,3 > 1 4 > 3
F 16.71 p .00					
People you work with	3.19	3.62	4.10	4.48	4,3 > 1 4,3 > 2
F 14.11 p .00					
Opportunities for promotion	1.19	1.84	2.86	3.69	4,3 > 1 4,3 > 2 4 > 3
F 34.55 p .00					
Opportunities for personal growth and development	1.23	2.13	3.10	3.82	4,3,2 > 1 4,3 > 2 4 > 3
F 43.12 p .00					

Note. Group 1 = not satisfied; group 2 = somewhat satisfied; group 3 = mostly satisfied; group 4 = very satisfied. Paired means which differ significantly at $p \leq .05$ are indicated.

The research findings are discussed in the following chapter.

CHAPTER 5

DISCUSSION OF FINDINGS

The research findings are discussed under sections pertaining to the eight questions posed in Chapter 1.

Availability of and Participation in Continuing Education Activities

Seven percent of non-medical support staff are sponsored annually to attend external training. In 1989/90, thirty staff in total were sponsored, from the three clerical departments--Admitting, Finance, and Health Records, and from the two technical departments--Materials Management and Plant Services, to participate in work-related training programs offered offsite by colleges or other organizations. No staff were sponsored from the labour intensive departments of Housekeeping, Linen Services and Nutrition Services.

Five departments offer one to two short inservices per year, generally on mandatory topics. In 1989/90, seventeen inhouse programs were offered. These were short, generally one-time programs, although one department has an education inservice as a regular feature of its monthly staff meeting. Two departments, Finance and Plant Services, did not offer inhouse programs in 1989/90; however, these departments had more funds for sponsoring staff to attend outside programs. External work-related training included clerical upgrading,

management training for career development, and specialized training pertaining to changing job needs.

Forty-two percent of workers indicated they had attended work-related training in the last two years. Of these, forty-four percent received financial assistance from the hospital. These numbers are higher than those indicated by managers; managers indicated 30 staff were sponsored, whereas 44 respondents indicated they had received financial assistance. This may be due to interview error; that is, when managers were asked how many staff were sponsored, rough estimates were accepted. As well, some of the respondents may have taken into account the inhouse programs they had attended.

The topics for inhouse sessions included safety, work procedures, information on other departments, and some communication issues. All of these topics were high priority learning needs of the respondents in the study.

It would appear that department managers and staff are aware of staff continuing education needs but have inadequate resources to address all of the needs. Aside from the hospital resources, approximately 20 percent of workers are pursuing work-related continuing education needs on their own time and with their own finances. This indicates a considerable commitment to continuing education on the part of the individual. However, there is no basis of comparison with other organizations.

Perceived Continuing Education Needs

Communication skills for working as a team and solving conflicts with supervisors and co-workers received the highest priorities as continuing education needs both from survey results as well as in the nominal group meetings. Four of the eight managers perceived that these were needs as well.

The identification of communication skills training as a continuing education priority concurs with Burke and Scalfano's (1990) comments that developing teamwork and communication skills are integral to getting the job done in today's organizations. Kahn and Westley (1984) also comment that hospitals are responding to organizational problems and to workers' rising expectations by trying to create teams as well as introducing other organizational innovations.

Training to increase safety on the job was another priority for continuing education from all respondents. Safety training was the second highest group of continuing education needs indicated on the survey and the third highest in the nominal group meeting summary. It was also a need perceived by one half of the managers.

Training for job skills required was the third highest priority on the survey and second from the nominal group meetings. This was a training need perceived by one manager.

If training for job skills is perceived as lacking, these gaps may affect work performance, which in turn, may affect

the level of satisfaction with the job. This supports Schwab and Cummings (1975) who stated that "the extent to which gaps exist between present and desired levels of competence and the availability of training programs to meet educational needs affect work performance: the quality of performance in turn affects the level of satisfaction with the job." Hammer (1977) also states that satisfying continuing education needs relates to positive job attitudes, growth, and fulfilment.

Wellness topics were of interest but other than managing stress on the job and learning about programs already available to staff, it was not a high priority from respondents to the survey. Stress management was rated as the fifth highest need in the nominal group meetings. In addition, wellness issues were listed by all eight managers.

In this study, basic education did not emerge as a priority either from the survey results, the interviews with managers, or the nominal group meetings. The results of this study are in contrast to a 1989 study done by the Hudson Institute that found an increasing need for basic training in literacy because of declining levels of the relative education and skill level of new workers. It may be hypothesized the group of non-respondents may display a higher need for these two continuing education needs than the respondents did.

Preferences for Ways of Learning

Instructor-led programs were most preferred, by the

survey respondents, and teleconferences were least preferred. The low rating for teleconferences may be partially due to respondents not knowing what teleconferences are. T.V. or video, reading books, or self-learning packages received moderate ratings in descending order. Managers also indicated instructor-led or video programs would be the preferred way of learning for their staff. This is consistent with the classic findings of Johnstone and Rivera (1965) that adults prefer the traditional modes of learning to the nontraditional.

Importance of Educational Opportunities when Ranked with Other Job Factors

Opportunities for personal growth and development were ranked fourth out of six items with regard to importance as a job satisfier. This is similar to Gudeman"s (1969) finding that "new learning" was the third most frequently cited job satisfier of community health workers. Quastel (1979) also found that satisfying continuing education needs related to job satisfaction.

Workers perceived opportunities for personal growth and development as somewhat important, more important than supervision or opportunities for promotion, but less important than the people they work with, pay level, and the nature of the job itself.

The scoring of importance of opportunities for personal growth and development as lower than pay differs from a 1988 Decima survey (Maynard, 1990) in which over half the workforce would trade higher pay for additional training. As well, the scoring of satisfaction with co-workers as the factor with the highest satisfaction rating and the nature of the work itself as second, differs with studies that show satisfaction with the work itself to be the most potent factor. (Herzberg et al., 1959; Roach, 1958; Kendall, Smith & Hulin, 1969; Locke, 1963). However, the means for these two items were not that different. Satisfaction with co-workers had a mean of 3.91 and satisfaction with the nature of the work itself had a mean of 3.49 on a scale of 1 to 5 where 1 equalled not satisfied and 5 equalled very satisfied.

In terms of satisfaction, workers rated satisfaction with opportunities for personal growth and development as "a little satisfied" to "somewhat satisfied" with opportunities for promotion receiving a lower satisfaction rating and the other four factors receiving a higher satisfaction rating. Workers were most satisfied with the relationships with people worked with, the nature of the job itself, pay level, and supervision on the job in descending order. This supports Gruenberg's (1980) statement that most people are satisfied with pay levels but dissatisfied with the opportunity to learn new things on the job.

The two factors workers were most satisfied with in this

study were the people worked with and the nature of the job itself. This differs from Kahn and Westley's (1984) study in which they found complaints included lack of mutual respect and support among co-workers, and lack of meaningfulness of their task (p. 16).

Present Level of Overall Job Satisfaction

The present level of overall job satisfaction is "somewhat" to "mostly satisfied" or 3.45 on a 1 to 5 scale, with 5 as the highest rating. Sixty percent of workers are mostly to very satisfied, 30 percent are somewhat satisfied, and 10 percent are not satisfied. The clerical and technical groups have a significantly higher rating for overall job satisfaction than the labour intensive group.

Employee dissatisfaction does not appear to be a major problem; however, 47 percent of non-medical support staff did not respond to the survey and it may be hypothesized that this group of non-respondents would display a higher rate of dissatisfaction than the group of respondents. As well, it may be of concern that 40 percent of workers were somewhat to not satisfied with their jobs.

Gruenberg (1980) also reported a generally high level of job satisfaction of workers in manual or routine jobs and indicated that extrinsic rewards are much more important to the unskilled, semiskilled, and clerical worker. Although the only extrinsic reward examined in this study was pay

level, the findings support Gruenberg's study. Pay level was rated second in importance after the people worked with. The construct of overall job satisfaction used in this study involved examining the pattern of satisfaction evolved in analyzing six job satisfaction factors and rating overall job satisfaction as a separate item. This is similar to Ewen (1967) who summed satisfaction scores from the five components of the Job Description Index and correlated the sums with two measures of job satisfaction. Wanous & Lawler (1972) also measured job satisfaction with different job facets. As well, they measured overall job satisfaction using a seven-point item and found that on the whole results from the single item were similar to those using the composite measure. The six factors examined were the nature of the job itself, supervision, present pay level, people worked with, opportunities for promotion, and opportunities for personal growth and development. A further discussion of the importance and satisfaction rating of these factors is found under the discussion of the "Importance of Educational Opportunities when Ranked with Other Job Factors," also in this chapter.

Relationship Between Continuing Education Needs and Overall Job Satisfaction

When respondents were grouped by overall job satisfaction level, only one continuing education need out of the 45

examined showed a statistically significant relationship. It is therefore concluded that continuing education needs and overall job satisfaction were not related in this study.

This is in direct contrast to Quastel's (1979) study which found a relationship between learning needs and job satisfaction of community mental health workers. It may be speculated that the relationship between continuing education needs and job satisfaction for non-professional workers may be different than for professional workers.

In contrast to this study, Gruenberg (1980) pointed out that increments of intrinsic satisfiers, such as educational opportunities, have been shown to have powerful effects upon overall job satisfaction. Enhancing communication skills may lead to better relationships with supervisors and co-workers. Safety training and skills training pertaining to the job may lead to increased satisfaction with the nature of the job. Therefore, although no direct relationship was found in this study, providing additional educational opportunities may impact indirectly upon job satisfaction. As well, Glenn and Weaver (1982) found that education enhances job satisfaction although the rewards are primarily extrinsic such as pay and occupational prestige.

The Effect of Background Characteristics on Continuing Education Needs and Job Satisfaction

Continuing Education Need By Department

Non-medical support workers indicated similar continuing education needs across departmental boundaries; however, clerical and technical departments have stronger needs in continuing education that contributes directly to the type of work done in the department. These findings support Tough's (1971) study in which subjects organized learning around "projects" to gain the necessary knowledge or skills.

Although communication items were rated highly by all departments, the clerical departments showed a significantly higher need for these items than did the labour intensive group.

Technical workers rated continuing education needs in the safety area and for use of equipment significantly higher than either the clerical or labour intensive groups. These findings are consistent with the nature of the jobs.

Continuing Education Need By Age

Workers, age 26 to 55, consistently reported a significantly higher need for the various continuing education needs than did older workers, age 56 and over. Pre-retirement workers are no longer focused on work and have much more leisure-centered goals or needs (Johnstone & Rivera, 1965). This is understandable given that older workers are beginning the process of disengagement with employment and preparation

for retirement whereas "job-centered reasons propel younger adults into education" (Johnstone & Rivera, 1965).

Addressing mid-career workers' continuing education needs is an important issue for organizations as enhancing job skills and job satisfaction leads to greater productivity. Continuing education opportunities may also affect recruitment, retention, and absenteeism (Maynard, 1990).

Continuing Education Needs By Level of Education

More educated workers indicated stronger continuing education needs. The most plausible explanation is that they may be more aware of learning that could contribute and assist them in their jobs.

There was a significant relationship between level of education and eleven of the continuing education needs. Six of these were in communication skills; the rest were from various categories. For most of the items, respondents with more education (some postsecondary) rated the need as significantly more important than did respondents with high school or less. The two items where this is understandably reversed were: "to finish grade 12" and "to learn to read well enough to follow written instructions." However, neither of these items were rated very highly by either group. Again, it may be hypothesized that the group of non-respondents may display a higher need for these two continuing education items than the respondent group. As well, Maynard (1990) refers to preliminary data from a study by The Conference Board of

Canada that suggest that workers' weaknesses in literacy and mathematics are causing errors and production problems for as many as 41 percent of companies.

Continuing Education Needs By Length of Employment

Respondents who had been employed for 21 to 25 years had four significantly higher continuing education needs regarding safety than respondents new (0 to 5 years employment) to the employment field. These longer-term workers appear to be more aware of the possible hazards on the job.

Job Satisfaction By Department

Clerical workers rated satisfaction with opportunities for personal growth and development as significantly higher than did the labour intensive. This corresponds to the lack of opportunities available to the labour intensive workers.

Gruenberg's (1980) study indicates that the extrinsic satisfiers of pay and job security should become increasingly important when intrinsic satisfiers such as education are missing.

However, in this study, there were no significant differences between departments for satisfaction with pay or satisfaction with any of the remaining factors (ie.nature of the job, co-workers, supervisors, opportunities for promotion).

Job Satisfaction By Age

Workers who are middle-aged showed a significantly higher overall job satisfaction than pre-retirement workers. These findings differ from Kahn and Westley (1984) who stated that older workers complained less about their work because they expected less of it. They also indicated that younger workers were more dissatisfied with the nature of the job. This study found no significant difference with satisfaction with this factor among the different age groups.

Younger to mid-age workers (under 26 and up to age 55) also felt opportunities for promotion were more important than did the pre-retirement workers. Younger and mid-career workers felt opportunities for personal growth and development were more important than did the pre-retirement group. There was a similar significant difference by age for the actual satisfaction rating.

Employees in mid-career indicated a significantly higher importance rating for the nature of the work itself than did older, pre-retirement workers or than the very young workers.

Job Satisfaction by Level of Education

Workers with more education (some postsecondary) gave a significantly higher importance to opportunities for personal growth and development, opportunities for promotion, and the nature of the job itself than did the less educated (high school or less). However,there were no significant differences in the actual satisfaction rating of these factors

or for any of the other three factors--supervision on the job, relationships with co-workers, or pay level. Wright and Hamilton (1979) also found that more highly educated workers assign more importance to opportunities for promotion and advancement.

However, these findings do not support Wright and Hamilton's (1979) statement that the college-educated worker is less concerned about co-workers and supervisors, and that they assign less importance to pay and benefits.

The findings do concur with previous studies that found that the more educated worker is no more dissatisfied with work than the less educated worker but that the more educated worker has a different set of expectations (Gruenberg, 1980; Wright & Hamilton, 1979). However, a future decline in job satisfaction (Quinn & Baldi de Mandilovitch, 1980; Staines & Quinn, 1979) may occur if these expectations of the more highly educated worker are not met.

This study did not support Gordon and Arvey's (1975) findings that the more highly educated are less satisfied with management than the less educated worker.

Job Satisfaction By Length of Employment

The total years employed and years employed at Lions Gate Hospital appear to have little influence on perceptions of importance and satisfaction with the various job satisfaction factors. However, there were two significant differences. Workers who have been employed for 6 to 10 years felt that

opportunities for promotion were significantly more important than did workers employed for 26 to 45 years. As well, workers newly employed at Lions Gate Hospital (0 or 1 year) were significantly more satisfied with opportunities for personal growth and development than were workers who had been employed at the hospital for 5 to 9 years.

There were no other significant differences between groups. The fact that relatively new workers (6 to 10 years employment) assign significantly more importance to opportunities for promotion than longer-term employees may be of importance for future satisfaction/dissatisfaction with the job. Sirota (1959) found a negative relationship when opportunities for promotion were frustrated and Patchen (1960) found a high frequency of absences among workers who felt they deserved promotion but didn't get it.

The summary, conclusions and recommendations for this study are in the following chapter.

CHAPTER 6

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

The purpose of this study was to identify perceived continuing education needs of non-medical support workers and to explore relationships between continuing education needs and job satisfaction of workers. This study was chosen because of its practical application to the worksite and the intent to begin implementation of Lions Gate Hospital's strategic plan.

Previous to and concurrent with this study, Lions Gate Hospital was developing a strategic plan in recognition of the many external and internal pressures and issues. This plan was released to hospital staff in May, 1990.

The manpower goal within that plan (Strategic Plan, Lions Gate Hospital) is as follows:

> To develop a manpower strategy to address recruitment, retention, and training issues such that staff are recognized and rewarded for their efforts. This includes employee services which enhance the employment experience and the availability of continuing education opportunities. (p. 14, 1990)

One of the objectives states "Lions Gate Hospital must support staff training and educational opportunities." The strategic plan also includes a focus on participative management skills and involving staff in the problem-solving, decision-making process.

This study was designed to involve non-medical support staff in the identification of their continuing education needs and to assess how important staff perceived opportunities for continuing education to be as well as assessing their satisfaction with current opportunities for education. The identified needs will assist in defining program goals for a support staff development program.

The methodology included interviews with managers for each of the participating departments--Admitting Services, Financial Services, Health Records, Linen Services, Housekeeping, Materials Management, Nutrition Services, and Plant Services. The intent of the interviews with the managers was to get the managers' perceptions of staff continuing education needs and job satisfaction levels.

The next phase was a series of small group meetings with randomly selected staff from the eight departments. These staff assisted in the identification of continuing education needs through a nominal group process. The nominal group is a method for generating ideas in situations where participants do not fully understand or agree upon the nature of the problem or how to solve the problem.

The continuing education needs identified in this process were utilized in constructing a questionnaire. The questionnaire was divided into three sections: background characteristics, continuing education needs, and job satisfaction. The background variables of department, age,

level of education, and length of employment were requested as well as information on current and future participation in work-related continuing education.

In the continuing education needs section, participants were asked to rate the importance of 45 continuing education needs. There were two parts in the job satisfaction section. Participants were asked to rate both the importance of job satisfaction factors as well as to give each factor a satisfaction rating. A final question asked respondents for their level of overall job satisfaction. A five point scale was used for rating both job satisfaction and continuing education need items.

The survey was distributed to the 453 staff employed by the eight participating departments. A return rate of 53 percent was achieved.

Survey data were analyzed by frequency counts, percentages, mean values, and ranges for the background variables; mean values for ranking the continuing education need variables and the job satisfaction factors; and analysis of variance or t-tests to determine the effects of background variables on continuing education needs and job satisfaction.

Conclusions

The main purpose of this study was to assess the work-related continuing education needs of non-medical support workers. These needs were identified, in order of priority,

as need for communication skills training, safety education, and training for job skills. These needs were identified through three approaches: interviews with manager, nominal group meetings with staff representatives, and a questionnaire. The use of the three study approaches validates the importance of the identified continuing education needs for this group of hospital workers and provides a concrete direction for program planning in conjunction with the hospital strategic plan.

Within each of the major continuing education need categories mentioned above, more specific training needs were identified. These will provide useful information to departmental managers in arranging for and providing for inservice education as well as in providing appropriate sponsorship, if the necessary rescurces are made available for the provision of continuing education opportunities.

Although overall job satisfaction of a majority of workers (60 percent) is "mostly to very satisfied," there is still some cause for concern in that the other 40 percent of workers are "somewhat to not satisfied." Anything that can be done to increase satisfaction with the job should be addressed.

Although this study did not find a direct relationship between continuing education needs and job satisfaction, the continuing education needs identified, if better satisfied, could still have a positive impact on satisfaction.

Learning activities that add to workers' skills to do the job, to do the job in a safe manner, and to improve their ability in interpersonal skills, all impact upon a worker's ability to do the job and to increase their productivity levels. Workers that are more able to do their jobs are more satisfied with their jobs and are more motivated to attend and have generally lower rates of absenteeism and turnover. As recruitment, retention, and absenteeism are all major issues in the hospital industry today, training could have a large impact upon these issues.

Although some continuing education opportunities are available,there are not enough. Workers indicated opportunities for personal growth and development as the fourth most important job satisfaction factor out of six items and indicated that they were only "a little satisfied" to "somewhat satisfied" with the opportunities available.

As the opportunities to give extrinsic rewards are negotiated on a provincial basis, individual hospitals need to assess other means of providing incentives to employees. Providing additional continuing education opportunities is one way to do this. In addition to a more satisfied workforce, hospitals will reap additional benefits in innovation and increased productivity.

Some positive findings in addition to the generally high overall job satisfaction level, were that the hospital's younger workers show no signs of being significantly more

dissatisfied with their jobs than other age groups. As the general education level of workers is increasing (approximately 60 percent of respondents had some postsecondary education), it should be reassuring to hospital managers that the more educated worker is as satisfied as the less educated worker. However, managers must be prepared to work with the different set of expectations that the more educated worker has.

Recommendations

For Lions Gate Hospital

1. It is recommended that Lions Gate Hospital provide additional continuing education opportunities to its support staff.

a) Programs to enhance communication skills, particularly skills for working as a team and for solving conflicts with co-workers and supervisors should be initiated. Programs in positive communications skills with co-workers, patients and visitors, and assertive communication skills should also be implemented.

b) Although the communication items were rated highly by all departments, the clerical departments showed a significantly higher need for this type of continuing education than did the labour intensive group. Therefore, a priority for training the clerical workers in communication skills is recommended.

c) Training to increase safety on the job must be improved. Safety education should include programs on working safely to prevent accidents, learning about equipment changes that affect safety, and how to take care of the back.

Of secondary importance for safety education are precautions against infectious disease, First Aid training, and educating other staff about how their unsafe working habits may affect others.

d) Technical workers rated continuing education needs in the safety area and for use of equipment significantly higher than either the clerical or labour intensive groups. Training in safety education is recommended as a priority for technical workers.

e) Better training for learning job skills should be provided. Training to do the job should include better training to use equipment/machinery, better training to do a new job, and training in proper and safe use of equipment.

f) Workers, age 26 to 55, consistently reported a significantly higher need for the various continuing education needs than did older workers, age 56 and over. It is recommended that mid-career workers' continuing education needs be addressed as a priority to assist with the issues of recruitment, retention, and absenteeism.

g) Wellness programs for managing stress on the job should be held as well as providing more information on programs currently available to staff such as fitness classes

and employee assistance.

h) Workers with some postsecondary education indicated stronger continuing education needs particularly in communication skills than did workers with less education. Again, to assist with the issues of retention, recruitment, and absenteeism, it is recommended these workers, in particular, be assisted with continuing education. As these workers may be more aware of what training could contribute and assist them in their jobs, they should be consulted for further input into development of a support staff training program.

i) Workers employed 21 to 25 years had significantly higher continuing education needs regarding safety than did respondents new (0 to 5 years employment) to the employment field. As these longer-term workers appear to be more aware of the possible hazards of the job, it is recommended that they be regularly consulted regarding these hazards and be involved in developing training programs.

j) These inhouse continuing education programs should be provided at the hospital on work time. They should be programs of short duration of a half day or less and should be instructor-led.

2. Forty-two percent of workers already participate in some form of work-related continuing education and approximately 20 percent of workers did the training entirely under their own initiative, on their own time and using their own

finances. If Lions Gate Hospital wants to keep these workers, their educational efforts must be recognized and supported. Both financial incentives and time on the job should be provided.

Although 40 percent of workers were willing to attend training on their own time and 64 percent were willing to attend on a shared time basis, managers should provide time to attend work-related educational experiences. The hospital should direct more financial resources toward this type of work relief.

3. The formation of a support staff education advisory committee is recommended. Committee membership should include union representatives, management, and staff members themselves, representing the various groups of departments.

4. It is recommended a system of monitoring changes in job satisfaction and changing continuing education needs be implemented. This study or some adaptation should be repeated periodically. Statistics for absenteeism, turnover, and the number of grievances should also be monitored.

5. It is recommended that any future adaptation of this study include differentiating between fulltime and part-time workers as one of the background variables. This was not done in this study and there may have been differences for these two groups of workers.

As well, union representatives should be consulted early in the study design. Their assistance and support would prove

valuable in increasing the return rate for a survey as well as providing an additional perspective.

For Other Hospitals

As this study is confined to the non-medical support staff of Lions Gate Hospital, it is limited to the perceptions of the population involved. The generalizability to other agencies should not be done without caution.

However, other hospitals may find some similar continuing education needs , should they conduct studies with their support staff.

Areas of Further Study

1. The relationship between continuing education needs and job satisfaction should be further explored as this study was limited to the non-medical support staff at one hospital.
2. This study found no relationship whereas a previous study (Quastel, 1979) found a relationship between learning needs and job satisfaction of community mental health workers. As the relationship between continuing education needs and job satisfaction may differ for professionals and non-professional groups, this possibility should be further explored.
3. As well, further studies should be done to examine changes in job satisfaction after training programs have been introduced or strengthened.
4. Long range studies examining pre and post training statistics for absenteeism, turnover, and job satisfaction

could also provide valuable information on the relationship between learning opportunities and job satisfaction.

REFERENCES

Adams, J.S. (1963). Toward an understanding of inequity. Journal of Abnormal and Social Psychology, 67, 422-436.

Ash, P. (1954). The SRA inventory: a statistical analysis. Personnel Psychology, 7, 337-364.

Astin, A.W. (1958). Dimensions of work satisfaction in the occupational choices of college freshmen. Journal of Applied Psychology, 42(2), 187-190.

Atwood, H.M. and Ellis, J. (1971). The concept of need: an analysis for adult education. Adult Leadership, 19(7), 210-212, 244.

Baehr, M.E. (1954). A factorial study of the SRA employee inventory. Personnel Psychology, 7, 319-336.

Beer, M. (1964). Organizational size and job satisfaction. Academy of Management Journal, 7(1), 34-44.

Bergevin, Paul. (1967). A philosophy for adult education. New York: Seabury Press.

Boshier, R. (1977). Motivational orientations re-visited: life-space motives and the education pacticipation scale. Adult Education, 28(2), 89-115.

Boudon, R. (1973). Education, opportunity, and social inequality. New York: John Wiley.

Bradshaw, Jonathan. (1974, March). The concept of social need. Ekistics, 220, 184-87.

Burke, B. and Scalfano, D. (1990, January). Toward continuous improvement. Training, 7(1), 75-79.

Caroll, B. (1973). Job satisfaction: a review of the literature. Key Issues: Background Reports on Current Topics in Labour-Management Relations-Number 3. Ithaca, New York: Cornell University.

Cartwright, D. and Zander, A. (1968). Group dynamics. Evanston: Row, Peterson.

Centers, R. and Bugental, D.E. (1966). Intrinsic and extrinsic job motivations among different segments of the working population. Journal of Applied Psychology, 50(3), 193-197.

Coch, L. and French, L.R. (1948). Overcoming resistance to change. Human Relations, 1, 512-532.

Evans, M.G. (1970). The effects of supervisory behaviour on the path goal relationship. Organizational Behaviour and Human Performance, 55, 277-298.

Ewen, R.B. (1967). Weighting components of job satisfaction. Journal of Applied Psychology, 51(1), 68-73.

Ewen, R.B., Hulin, C.L., Smith, P.C., and Locke, E.A. (1966). An empirical test of the Herzberg two-factor theory. Journal of Applied Psychology, 50(6), 544-550.

Festinger, L. (1957). A theory of cognitive dissonance. Stanford: Stanford University Press.

Fishbein, M. (1967). Attitude and prediction of bevaviour. In Fishbein, M. (Ed.). Attitude theory and measurements. New York: John Wiley and Sons.

Ford, R.N. and Borgatta, E.F. (1970). Satisfaction with the work itself. Journal of Applied Psychology, 54(2), 128-134.

Freeman, R. (1976). The over-educated American. New York: Academic Press.

Friedlander, F. (1966). Importance of work versus non-work among socially and occupationally stratified groups. Journal of Applied Psychology, 50, 437-41.

Freire, Paulo. (1970). Pedagogy of the oppressed. New York: Herder and Herder.

Glasscote, R.M. and Gudeman, J.E. (1969). The staff of the mental health centre: a field study. Washington: The Joint Information Service of the American Psychiatric Association and the National Institute of Mental Health.

Glenn, N.D. and Weaver, C.N. (1982a). Enjoyment of work by full-time workers in the U.S., 1955 and 1980. Public Opinion Quarterly, 46, 459-470.

Glenn, N.D. and Weaver, C.N. (1982b). Further evidence on education and job satisfaction. Social Forces, 61(1), 46-55.

Goodman, P.S. and Friedman, A. (1975). An examination of Adams' theory of inequity. In Steers, R.M. and Porter, L.W. (Eds.). Motivation and work behaviour. New York: McGraw-Hill.

Gordon, M.E. and Arvey, R.D. (1975). The relationship between education and satisfaction with job content. Academy of Management Journal, 18(4), 888-892.

Gruenberg, B. (1980). The happy worker: an analysis of educational and occupational differences in determinants job satisfaction. American Journal of Sociology, 86(2), 247-271.

Hammer, V.B. (1977). A model relating an adult in a job, interests and needs, and continuing education. Journal of Continuing Education in Nursing, 8(5),15-23.

Herzberg, F., Mausner, B., and Snyderman, B. (1959). The motivation to work. New York: Wiley.

Herzberg, F. (1973). Work and the nature of man. New York: The World Publishing Company.

Homans, G.C. (1961). Social behaviour: Its elementary forms. New York: Harcourt-Brace.

Houle, C.O. (1961). The inquiring mind. Madison: The University of Wisconsin Press.

Houle, C.O. (1972). The design of education. San Francisco: Jossey-Bass.

Hudson Institute. (1989). Workforce 2000: work and workers for the 21st century. U.S. Department of Labor.

Jackson, J.M. (1953). The effect of changing leadership of small work groups. Human Relations, 6, 25-44.

Jackson, J.M. (1959). Reference group processes in a formal organization. Sociometry, 22, 307-327.

James, Bernard. (1956, Fall). "Can "needs" define educational goals?" Adult Education,7, 19-26.

Johnstone, J.W.C. and Rivera, R.J. (1965). Volunteers for learning. Chicago: Aldine Publishing Co.

Kahn, J. and Westley, W.A. (1984). The working environment in Canadian hospitals. Constraints and opportunities. Quality of Working Life, Canadian Hospital Survey Report. Ottawa: Publications Distribution Centre, Labour Canada.

Katzell, R.A. and Yankelovitch, D. (1975). Work, productivity and job satisfaction. New York: The Psychological Corporation.

Kendall, L.M., Smith, P.C., Hulin, C.L. and Locke, E.A. (1963). Cornell studies of job satisfaction: IV : The relative validity of the job descriptive index and other measures of job satisfaction. Ithica: Cornell University.

Knowles, Malcolm. (1970). The modern practice of adult education. New York: Association Press.

Knox, Alan B. (1968, April). "Interests and adult education." Journal of Learning Disabilities,1, 220-29.

Komisar, P. (1961). 'Need' and the needs-curriculum. In Smith, B.O. and Ennis, R.H. (Eds.). Language and concepts in education. Chicago: Rand McNally and Co.

Lauffer, A. (1978). Doing CE and staff development. New York: McGraw-Hill Book Co.

Lewin, K. (1938). The conceptual representation and the measurement of pychological forces. Durham: Duke University Press.

Lewis, A. (1974). The use of analytical techniques to determine health manpower requirements for educational planning - or how do I find out what skills and knowledges to teach? In Charters, A.N. and Blakely, R.J. (Eds.). Fostering the growing need to learn . Syracuse: Syracuse University.

Lions Gate Hospital. (1990). Stategic Plan. North Vancouver, British Columbia: Hospital Administration.

Likert, R. (1961). New patterns of management. New York: McGraw-Hill.

Locke, E. A. (1969). What is job satisfaction? Organizational Behavior and Human Performance, 4, 309-336.

McClelland, D.C., Atkinson, J.W., Clark, R.A., and Lowell, E.L. (1953). The achievement motive. New York: Appleton-Century-Crofts.

Maslow, A.H. (1954). Motivation and personality. New York: Harper and Row.

Maslow, A.H. (1968). Toward a psychology of being. New York: D. Van Nostrand Company.

Maynard, R. (1990, June). The next labour crisis. Report on Business Magazine. 41-48.

Monette, Maurice L. (1977). The concept of educational need: an analysis of selected literature. Adult Education, 27(2), 116-127.

Munsterberg, H. (1913). Psychology and industrial efficiency. Boston: Houghton-Mifflin.

Murray, Henry A. (1938). Explorations in personality. New York: Oxford University Press.

Newcomb, T.M. (1956). The prediction of interpersonal attraction. American Psychologist, 11, 575-586.

O'Toole, J. (1977). Work, learning and the American future. San Francisco: Jossey-Bass.

Patchen, M. (1961). The choice of wage comparisons. Englewood Cliffs: Prentice-Hall.

Peterson, C. (1986). Psychological well-being and female clerical workers. Vancouver: University of British Columbia. Unpublished masters' thesis.

Porter, L.W. (1961). A study of perceived need satisfaction in bottom and middle management jobs. Journal of Applied Psychology, 45(1), 1-10.

Putnum, M.L. (1930). Improving employee relations. Personnel Journal, 8, 314-325.

Quastel, L.N. (1979). Learning needs and job satisfaction of community mental health workers. Vancouver: University of British Columbia, Unpublished thesis.

Quinn, R.P. and Baldi de Mandilovitch, M.S. (1977, December). Education and job satisfaction 1962-1977. The Vocational Guidance Quarterly, 100-111.

Roach, D.E. (1958). Dimensions of employee morale. Personnel Psychology, 11, 419-431.

Roethlisberger, F.J. and Dickson, W.J. Management and the worker. Cambridge: Harvard University Press.

Sawatsky, J.C. (1951). Psychological factors in industrial organization affecting employee stability. Canadian Journal of Psychology, 5, 29-38.

Scott, D. and Deadrick, D. (1982, June). The nominal group technique: applications for training needs assessment. Training and Development Journal, 26-33.

Schwab, D.P. and Cummings, L.L. (1975). Theories of performance and satisfaction: a review. In Steers, R.M. and Porter, L.W. (Eds.). Motivation and work behaviour. New York: McGraw-Hill.

Sirota, D. (1959). Some effects of promotional frustration on employees' understanding of, and attitudes toward, management. Sociometry, 22, 273-278.

Smith, P.C., Kendall, L.M., and Hulin, C.L. (1969). The measurement of satisfaction in work and retirement. Chicago: Rand McNally.

Staines, G. and Quinn, R. (1979). American workers evaluate the quality of their jobs. Monthly Labor Review, 102, 3-12.

Tough, A. (1971). The adult's learning projects. Toronto: Ontario Institute for Studies in Education.

Trust, E. and Westley, W.A. (1982). Quality of working life in the Federal Public Service. Minister of Supply and Services, Canada.

Van de Ven, A.H. and Delbecq, A.L. (1971, June). Nominal versus interacting group processes for committee decision-making effectiveness. Academy of Management Journal, 203-212.

Vroom, V.H. and Mann, F.C. (1960). Leader authoritarianism and employees attitudes. Personnel Psychology, 13, 125-140.

Vroom, V.H. (1964). Work and motivation. New York: John Wiley and Sons.

Walker, C.R. and Guest, R.H. (1952). The man on the assembly line. Cambridge: Harvard University Press.

Wanous, J.P. and Lawler, E.E. (1972). Measurement and meaning of job satisfaction. Journal of Applied Psychology, 56(4), 95-105.

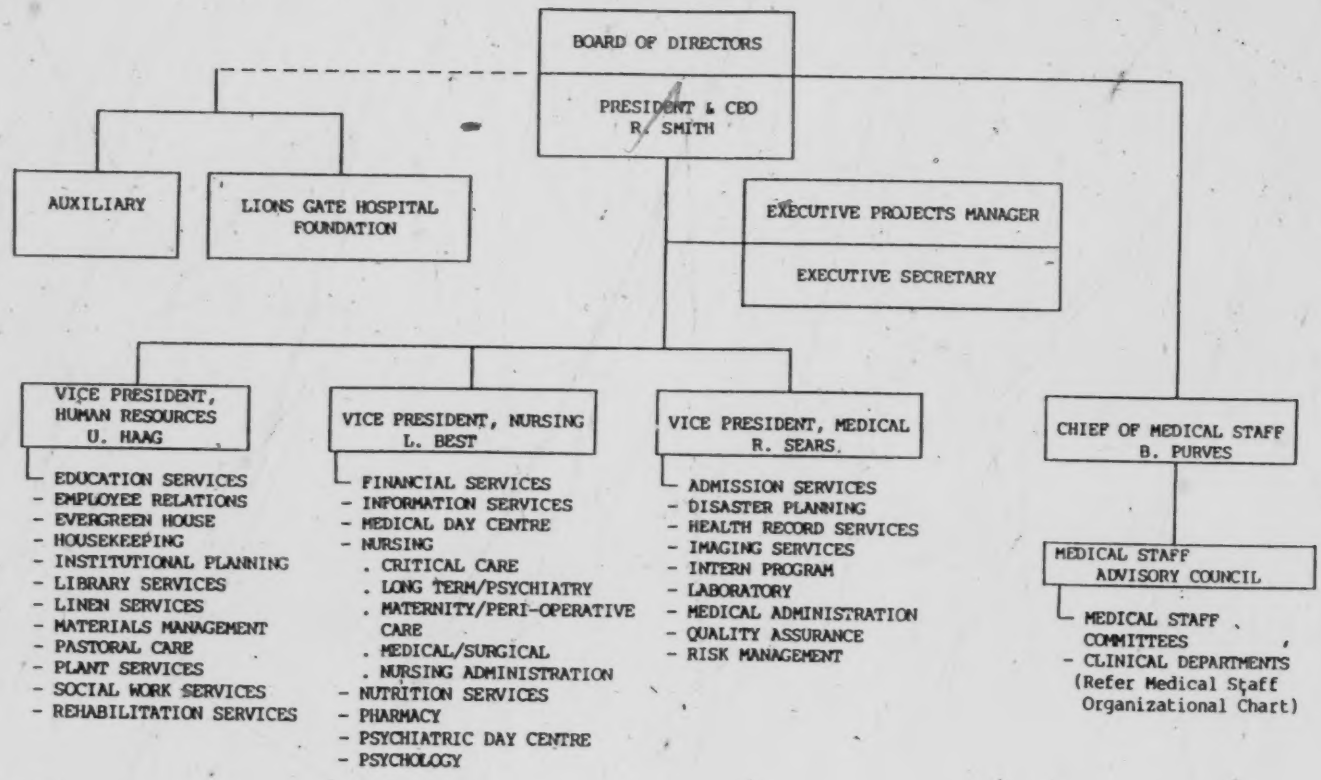
Webster's seventh new collegiate dictionary. (1965). Toronto, Ontario: Thomas Allen, Ltd.

Wherry, R.J. (1958). Factor analysis of morale data: reliability and validity. Personnel Psychology, 11, 78-89.

Wright, J.D. and Hamilton, R.F. (1979). Education and job attitudes among blue-collar workers. Sociology of Work and Occupations, 6(1), 59-83.

APPENDIX 1

LIONS GATE HOSPITAL
ORGANIZATIONAL CHART
JULY 1, 1990



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APPENDIX 2

LEARNING NEEDS AND JOB SATISFACTION

OF NON-MEDICAL SUPPORT WORKERS

November 22, 1989

Dear Department Head:

As discussed with you earlier, I would like to meet with you regarding the current learning opportunities and perceived learning needs of your staff.

As the Director of Education Services, I am interested in the information this would provide for purposes of inservice education planning. I am also a graduate student at the University of Alberta, Edmonton, in my final year of the M.Ed. in Adult, Career and Technology Education Program. As an area of interest, I am particularly interested in human resource development. Human resource development literature suggests that "new learning" is a frequently cited job satisfier for workers and I am interested in investigating this relationship at Lions Gate Hospital.

The purpose of my research is to identify perceived continuing education needs of non-medical support staff and to determine if there is a relationship between learning need, learning opportunity, and job satisfaction.

In order to begin to gather this information, I would like to meet with you at , on . Please consider the following questions in preparation for our interview:

a) What continuing education opportunities are currently available to non-medical support workers?

b) What continuing education opportunities are participated in by non-medical support workers?

c) What are the perceived continuing education needs of non-medical support workers?

d) What are the preferences for means of addressing these needs?

e) Is there a learning need/opportunity discrepancy?

f) How important are educational opportunities tc non-medical support workers when ranked with other job factors?

g) What is the present level of overall job satisfaction of non- medical support workers?

h) Is there a relationship between learning need/opportunity discrepancy and overall job satisfaction of non-medical support workers?

Questions a), b), and c) are the three questions I would like to concentrate on in my meeting with you; However, your opinion on each of the others would be valued as well.

In addition to the interview with you, I need your help in recruiting staff members that could participate in group meetings, the next stage of this study. The purpose of the meetings would be to determine perceived learning needs from the viewpoint of staff.

Each person should be representative of 5 to 10 other staff involved in a similar type of work. The group meetings will take place in January, 1990 and will take approximately 2 hours during the work day.

Suggested staff members or nominees should be people who are currently full-time employees in your department and who have been employed full-time in this department for at least a year.

The nominees should be people who interact on a regular basis (one or more times a day) with other staff in the department and should have a good command of the English language.

Would you please have between 5 to 9 names ready at the time of my interview with you?

Thank you very much for your assistance with this project. I look forward to meeting with you soon.

Sincerely,

Jean Blake,
Director of Education Services,
Graduate Student, University of Alberta

LEARNING NEEDS AND JOB SATISFACTION OF NON-MEDICAL SUPPORT STAFF

January 29, 1990

Dear Staff Member:

I am the Director of Education Services at Lions Gate Hospital and I am also a graduate student at the University of Alberta, working on my thesis. In both these roles, I am interested in studying the learning needs and job satisfaction of support staff at Lions Gate Hospital.

Could I have your assistance in determining your work area's learning needs? You can help by meeting with me and 5 to 7 other staff for approximately one hour during the work day. We will brainstorm possible learning needs and then priorize these needs.

In preparation for the meeting, it would be useful if you could talk to other staff in your work area about their learning needs. In the meeting, you will represent your work area's learning needs as well as your own.

Participation is voluntary. Your Department Head has agreed that this will be part of your work day if you agree to help. If you are willing to participate in the meeting, please read and sign the agreement on the next page. Return the agreement to me in Education Services. If you have any questions, I would be pleased to answer them (Local 735). I will be contacting you shortly with further information.

I look forward to your help with this project. Thank you very much.

Sincerely,

Jean Blake,
Director, Education Services
Graduate Student, University of Alberta

LEARNING NEEDS AND JOB SATISFACTION OF NON-MEDICAL SUPPORT WORKERS

January 31, 1990

Dear Staff Member:

Re: Group Meeting

Thank you for agreeing to participate in the learning needs and job satisfaction study.

The group you will be participating in will meet from 2:00 to 3:00 p.m., Thursday, February 8, 1990 in the Crescent Small Dining Room.

Coffee and tea will be provided.

I look forward to seeing you on February 8th.

Sincerely,

Jean Blake,
Director, Education Services
Graduate Student, University of Alberta

LEARNING NEEDS AND JOB SATISFACTION
OF NON-MEDICAL SUPPORT STAFF

Agreement to participate in the group meeting portion of the study

My signature on this letter indicates that I agree to participate in the group meeting portion of this study. I understand that the group session will be approximately one hour in length, during a work day. I further understand that my participation is voluntary and that I may stop participating at any time and that all individual results from the group discussion will be kept confidential. My participation will in no way affect my job or career at this or any other place of employment.

_____ _____

(SIGNATURE) (DATE)

March 23, 1990

Dear

Re: **LEARNING NEEDS AND JOB SATISFACTION STUDY OF NON-MEDICAL SUPPORT STAFF**

Thank you for having participated in the Nominal Group meetings for the above study.

Enclosed are two copies of the survey that I want to send out to staff as the third and final part of the study.

May I have your help once more? I would like to check how long it takes to complete the survey and want to know how easy it is to understand the questions.

You can help by:

1. Complete one copy of the survey and record the time it takes you to complete it (see below).

2. Go back through the survey and make any changes ycu think would make the questions more readable and understandable to other staff members. If you don't understand something, please circle it or otherwise mark it.

3. Please ask another staff member from your department to complete the second enclosed copy of the survey. This person should not have been in the Nominal Group meeting, as I would also like opinions from staff members who are not familiar with the study. Please ask this person to also record the time it takes them to complete the survey and also to make any comments or suggestions on the survey.

4. Please return both copies of the survey to Education Services by March 30, if possible.

Thank you again for all your help.

Sincerely,

Jean Blake,
Director, Education Services

TIME TO COMPLETE SURVEY WAS: _____ MINUTES

APPENDIX 3

LIONS GATE
HOSPITAL

231 East 15th Street
North Vancouver B C
V7L 2L7

Tel (604) 988-3131
Fax (604) 988-3184

LEARNING NEEDS AND JOB SATISFACTION

OF NON-MEDICAL SUPPORT STAFF

April 11, 1990

Your help is needed.

Dear Staff Member:

I am the Director of Education Services at Lions Gate Hospital and I am also a graduate student at the University of Alberta, working on my thesis. In both these roles, I am interested in studying the learning needs and job satisfaction of support staff at Lions Gate Hospital.

Could I have your assistance in helping to identify support staff's learning needs and to determine if there is a relationship between learning need and job satisfaction?

You can help by completing the attached questionnaire. Your participation is voluntary and you may leave any questions unanswered. Your responses are anonymous and can in no way have any influence on your work or your job. The results will help in planning educational programs for staff.

The questionnaire only takes about 20 minutes to complete. I would appreciate your completing it and returning it to Education Services by **April 20,1990.** Just fold and staple the completed questionnaire, and place it in the internal hospital mail. The return address is on the back of the survey.

Thank you for your support and interest. If you have any questions, please feel free to call me at local 735.

Sincerely,

Joan Blake

Joan Blake,
Director, Education Services
Graduate Student, University of Alberta

Thursday, May 10, 1990

Dear Staff Member,

Your help is needed. Please take 15 minutes to answer the attached questions. The hospital has provided some money for support staff training in the coming year. To decide on what programs to offer, I need to know what your learning needs are.

I met earlier with small groups of support staff from service departments to get ideas on your needs and wrote the questions using these ideas. As I need to know which topics are most important to the most support staff, your response is needed.

Please help by answering the questions and returning the form to Education Services as soon as possible.

All responses are anonymous and confidential. Thank you for your help.

Sincerely,

Jean Blake

Jean Blake,
Director, Education Services

Please note:

1. You can return the questionnaire by:
   a) putting it in the "RETURN" box provided in your department
   b) dropping by Education Services
   c) putting it in the hospital interdepartmental mail

2. If you already filled out a questionnaire from the first mailing, please return this one unmarked.

3. If you are not interested, please answer the survey anyway. Use "1" or "not important" to answer the learning needs questions.

Thanks again.

1

Do not write in this space.

PART I - GENERAL INFORMATION

Please mark your response by circling the appropriate number or by writing in the answer. 1 2 3 1/4

A. What department do you work in at Lions Gate Hospital? 5

_____

B. Do you consider yourself to be? 6

1. Early Career
2. Mid-Career
3. Late Career (Pre-retirement)

C. How old are you? 7

1. Under 26
2. 26 - 40
3. 41 - 55
4. 56 and over.

D. What is the highest level of education you have completed? (circle only one) 8

1. Elementary education (grade six)
2. Junior High School (grade 9)
3. Senior High School (grade 12 or equivalent ie. GED)
4. Post-Secondary Certificate or Diploma (eg. Vocational School diploma, B.C.I.T. certificate, etc.)
5. Part of a university degree.
6. University degree.

E. How many years have you been employed? _____ 9.10

F. How many years have you been employed at Lions Gate Hospital? 11.12

_____

G. How many years have you been employed in your present department at Lions Gate Hospital? 13.14

_____

H. How many years have you been employed in your present job at Lions Gate Hospital? 15.16

_____

Do not write in this space.

I. Have you attended a work-related training course in the last two years? (ie. a course that would help you to do your work better at the hospital) 17

1. yes

2. no. If no, go to question L (omit J and K).

If yes, how many? 18

1. One

2. Two

3. Three

4. Four or more.

J. Did you receive financial assistance from the hospital in order to attend any course? 19

1. yes

2. no

If yes, what proportion? 20

1. 100%

2. 50%

3. other _____ (Please specify what proportion).

K. Did you attend the course 21

1. entirely on your own time

2. entirely on hospital time

3. on a shared time basis ie. partly your own time, partly hospital work-time

L. Would you be willing to attend courses at the hospital (circle all that apply)

1. entirely on your own time 22

2. entirely on hospital work time 23

3. on a shared time basis ie. partly your own time and partly hospital work time. 24

3 | Do not write in this space.

M. Would you be available to take courses (circle all that apply)

1. on site at the hospital | 25
2. off site | 26
3. during the working day | 27
4. evenings after work | 28
5. on weekends or days off. | 29

N. Length of courses should be (circle all that you would support)

1. one to two hours | 30
2. half day | 31
3. full day | 32
4. two day courses or longer. | 33

O. Rank order your preferred ways of learning using 1 as your most preferred way and 5 as your least preferred way.

_____ by reading books | 34
_____ by watching T.V. or video | 35
_____ taught by an instructor | 36
_____ attending teleconferences (programs offered over a sound system hooked up to a phone) | 37
_____ self-learning packages. | 38

4

Do not write in this space.

PART II. LEARNING NEEDS

This section deals with the various continuing education needs of employees.

"What are **your** needs for work-related continuing education?"

For each item, please circle the number on the scale from 1 to 5 that **you feel** indicates the importance of each topic to **you.**

1	2	3	4	5
Not Important	Little Importance	Somewhat Important	Considerable Importance	Very Important

1. To learn communication skills to work as a team.

   1 2 3 4 5 39

2. To learn about other departments.

   1 2 3 4 5 40

3. To learn about programs available for staff such as benefits, fitness classes, retirement planning, etc.

   1 2 3 4 5 41

4. To become assertive in my communication style rather than passive or aggressive.

   1 2 3 4 5 42

5. To learn to solve conflicts on the job with other staff.

   1 2 3 4 5 43

6. To learn to solve conflicts on the job with supervisors.

   1 2 3 4 5 44

7. To learn to give positive feedback to co-workers.

   1 2 3 4 5 45

8. To learn to be positive in communications with patients and visitors.

   1 2 3 4 5 46

9. To learn proper use of the telephone ie. telephone do's and don'ts.

   1 2 3 4 5 47

		Do not write in this space.
	5	
10. To learn proper business etiquette.		
1 2 3 4 5		48
11. To learn guest (or customer) relations skills.		
1 2 3 4 5		49
12. To know how to use machinery or equipment in my department.		
1 2 3 4 5		50
13. For staff working together on a machine to know the role of every other staff working with them on the machine.		
1 2 3 4 5		51
14. To have training for doing work as a "backup" to other staff.		
1 2 3 4 5		52
15. To have periodic refresher training for doing "backup" work.		
1 2 3 4 5		53
16. To be better trained to do a new job.		
1 2 3 4 5		54
17. To learn how to do a performance appraisal of myself.		
1 2 3 4 5		55
18. To become more aware of my role in department programs for checking the quality of service we provide.		
1 2 3 4 5		56
19. To learn about equipment changes that affect my safety.		
1 2 3 4 5		57
20. To learn how to educate staff in other departments about how their unsafe work practices may affect me.		
1 2 3 4 5		58
21. To learn how to work in a safe way to prevent accidents.		
1 2 3 4 5		59

6 | Do not write in this space.

22. To have a better understanding of precautions used to protect against infectious diseases.

1 2 3 4 5 | 60

23. To be trained in procedures to take care of my back.

1 2 3 4 5 | 61

24. To be trained in proper and safe use of equipment.

1 2 3 4 5 | 62

25. To have information and training about chemical usage.

1 2 3 4 5 | 63

26. To have training about sharp object disposal.

1 2 3 4 5 | 64

27. To have First Aid training.

1 2 3 4 5 | 65

28. To learn fitness activities as a way of improving my personal health and well-being.

1 2 3 4 5 | 66

29. To have information on training needed for other jobs in the hospital.

1 2 3 4 5 | 67

30. To have information on other job opportunities in the hospital.

1 2 3 4 5 | 68

31. To improve my reading skills.

1 2 3 4 5 | 69

32. To improve my writing skills.

1 2 3 4 5 | 70

33. To improve my math skills.

1 2 3 4 5 | 71

34. To finish grade 12.

1 2 3 4 5 | 72

	7	1 2 3 2/4
35. To learn to read well enough to understand written instructions.		
1 2 3 4 5		5
36. To learn to write reports.		
1 2 3 4 5		6
37. To learn medical terminology.		
1 2 3 4 5		7
38. To learn the basic skills of using a computer.		
1 2 3 4 5		8
39. To learn more advanced computer skills.		
1 2 3 4 5		9
40. To be able to manage stress on the job.		
1 2 3 4 5		10
41. To be able to manage stress at home.		
1 2 3 4 5		11
42. To learn to feel better about myself.		
1 2 3 4 5		12
43. To learn how to take care of my physical self. eg. nutrition, weight loss, fitness, leisure activities.		
1 2 3 4 5		13
44. To learn how to adjust to change more easily.		
1 2 3 4 5		14
45. To learn how to manage my use of time.		
1 2 3 4 5		15

8 Do not write in this space.

List any other learning needs you have and rate them on the scale.

46. _____

1 2 3 4 5 16

47. _____

1 2 3 4 5 17

48. _____

1 2 3 4 5 18

III. JOB SATISFACTION

In this section, I would like to know about your present level of job satisfaction.

A. How important is each of the following factors in your decision to continue to work at your present job?

For each item, please circle the number that you feel indicates the importance of each topic to you.

1 2 3 4 5

Not Important | Little Importance | Somewhat Important | Considerable Importance | Very Important

1. The nature of the work itself.

1 2 3 4 5 19

2. The supervision you have on your present job.

1 2 3 4 5 20

3. Your present pay level.

1 2 3 4 5 21

4. The people you work with and your relationship with them.

1 2 3 4 5 22

5. The opportunities for promotion that are possible.

1 2 3 4 5 23

6. The opportunities for personal growth and educational development that you have.

1 2 3 4 5 24

9

Do not write in this space.

B. How satisfied are you with each of the fcllowing factors at your present job?

For each item, please circle the number that indicates your level of satisfaction with each factor.

1 Not Satisfied	2 A Little Satisfied	3 Somewhat Satisfied	4 Mostly Satisfied	5 Very Satisfied

1. The nature of the work itself.

1 2 3 4 5 25

2. The supervision you have on your present job.

1 2 3 4 5 26

3. Your present pay level.

1 2 3 4 5 27

4. The people you work with and your relationships with them.

1 2 3 4 5 28

5. The opportunities for promotion that are possible.

1 2 3 4 5 29

6. The opportunities for personal growth and educational development that you have.

1 2 3 4 5 30

7. Finally, what is your overall level of job satisfaction?

1 2 3 4 5 31

Thank you for your assistance in completing this survey.

Please return to: Jean Blake
Education Services
Lions Gate Hospital